

Building Use Form

(Please fill out and return to the Main Office)

Event: _____	Event Date: _____
Person Making Request: _____	Date: _____
Time From: _____	To: _____ (See ** in Special Needs)
Set Up Date: _____	Set Up Time: _____
Clean Up Date: _____	Clean Up Time: _____

Areas Requested	Equipment Requested	Special Needs
<input type="checkbox"/> Activity Center Foyer <input type="checkbox"/> Activity Center Kitchen <input type="checkbox"/> Activity Center Gym <input type="checkbox"/> Auditorium <input type="checkbox"/> 3 rd Floor Dining Room <input type="checkbox"/> 3 rd Floor Kitchen <input type="checkbox"/> Old Gym <input type="checkbox"/> Other _____ _____ _____	<input type="checkbox"/> Tables (# _____) <input type="checkbox"/> Chairs (# _____) <input type="checkbox"/> Desks (# _____) <input type="checkbox"/> Garbage Cans (# _____) <input type="checkbox"/> Media (please list below) _____ _____ <input type="checkbox"/> Other _____ _____ _____	<input type="checkbox"/> Heat <input type="checkbox"/> A/C <input type="checkbox"/> Ensure area is cleaned prior to event <input type="checkbox"/> Need Building open/closed <input type="checkbox"/> Floor Plan Attached <input type="checkbox"/> Volunteers (please fill out "Internal Volunteer Request") <div style="background-color: yellow; padding: 2px;"> ** If the event takes place after 4:00 when office is not staffed, indicate who is covering front foyer: </div> _____ _____

Special Instructions

Approvals (Office Use Only)

Neal
 Deb
 Kylie
 Gabe
 Cafe
 Other

Notes: _____

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Date Approved: _____

Copy to: Joel
 Calendar
 Office
 Requestor
 AV
 Fine Arts
 Café
 AD