

**CANTON SCHOOL DISTRICT
FACILITY USE REQUEST FORM**

SUBMIT TO DISTRICT

Groups using the facilities of the Canton School District are requested to treat the facility with respect and to leave the facility in the same set-up as when their activity started. Please note that Canton Schools are smoke-free campuses.

Rev 11/23/2011

ACTIVITY/EVENT INFORMATION (Part 1)	
Date of Activity/Event: _____	Activity/Event: _____
Time of Activity/Event: _____	Start Time: _____ End Time: _____
Facilities/Rooms Requested: (Fee Assessed)	Number of People Expected: _____
<p align="center">High School/Middle School</p> <input type="checkbox"/> Classroom(s) per rental per. <input type="checkbox"/> Kitchen & Lunchroom <input type="checkbox"/> Lunchroom <input type="checkbox"/> Commons <input type="checkbox"/> Commons & Stage <input type="checkbox"/> LMC (Library Media Center) <input type="checkbox"/> Computer Labs <input type="checkbox"/> Main Gym <input type="checkbox"/> Auxiliary Gym <input type="checkbox"/> Concession Stand	<p align="center">Lawrence Elementary</p> <input type="checkbox"/> Classroom(s) <input type="checkbox"/> Kitchen <input type="checkbox"/> Multi-Purpose Room (Lunchroom) <input type="checkbox"/> Jacobson Gym <input type="checkbox"/> LMC (Library Media Center) <input type="checkbox"/> Computer Lab <p align="center">Performing Arts Center</p> <input type="checkbox"/> Stage/House <input type="checkbox"/> Main Lobby

SET-UP INFORMATION (Part 2)	
Equipment Request (set-up fee assessed)	
<input type="checkbox"/> Public Address System <input type="checkbox"/> Podium <input type="checkbox"/> Sports Equipment _____ <input type="checkbox"/> Microphones (list what kind) _____ <input type="checkbox"/> Chairs (how many) _____ <input type="checkbox"/> Tables (how many) _____ <input type="checkbox"/> Kitchen (additional fee is assessed for kitchen staff to be available, if required) <input type="checkbox"/> Other Information Needed (use back of form to diagram any special set-up requests)	<input type="checkbox"/> Bleachers Pulled <input type="checkbox"/> Sound System <input type="checkbox"/> Television <input type="checkbox"/> Projector <input type="checkbox"/> Screens <input type="checkbox"/> Pianos
Set-up/Take-down requested to be done by:	
<input type="checkbox"/> Responsible party (person who signs as responsible party) Responsibilities of: <ul style="list-style-type: none"> ✓ Set-up/take-down of chairs/tables, if app. ✓ Trash is put in appropriate receptacles ✓ Area has been swept ✓ Appropriate supervision of people involved ✓ Check all areas upon leaving facility for cleanliness (includes restrooms) ✓ You are the one that is called if there is anything that is missing or vandalized 	<div style="border: 1px solid black; padding: 5px;"> NOTES: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ </div>
<input type="checkbox"/> Custodial Team <ul style="list-style-type: none"> ✓ Set-up/take-down of equipment ✓ It is still the responsibility of the rental party to leave the facility the way that it was found 	

Responsible Party Information:

NAME: _____ Address: _____
 PHONE: (Home) _____ (Cell) _____ (Work) _____
 EMAIL: _____

Signature of Responsible Party

Date of Request

After Part 1 & 2 have been returned and reviewed, then Part 3 – Fee information – will be sent to you. Part 3 will need to be signed, returned with fee included before event will finalized on the calendar.