

EQUIPMENT REQUEST FORM

(Please refer to Policy – Use of School Facilities by Nonschool Groups, and to Guidelines for Auditorium Use by Nonschool Groups for overall regulations)

ORGANIZATION _____

CONTACT PERSON _____

ADDRESS _____

PHONE _____ (HOME) _____ (BUSINESS)

DESCRIPTION OF ACTIVITY _____

<u>EQUIPMENT NEEDED</u>	<u>QUANTITY</u>	<u>DATE NEEDED</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUBMITTED BY : _____ **DATE:** _____

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FOR SCHOOL USE ONLY

DATE RECEIVED _____ **REVIEWED BY** _____

APPROVED _____ **DISAPPROVED** _____

COMMENTS: _____

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OFFICE OF COMMUNITY SERVICES

COMMENTS: _____

SIGNATURE _____

APPROVED _____ **DISAPPROVED** _____ **DATE** _____