Molalla River School District

Code: KG-AR(3)
Revised/Reviewed: 5/14/09; 7/10/14

Facility Use Request and Agreement If use cancelled, a cancellation form must be completed

Organization/Nature of Organization	ion					
Name of Supervisor	<u> </u>					
Email						
Phone Numbers		1				
Address		İ				
		1				
Type of Activity: game, practice, class,		1				
clinics, fundraisers, tryouts, meeting, other						
Building Requested		MHS	MRMS	District Office	PE Gym	MES
(circle one)		Mulino	Rural Dell		•	
		Clarkes	Natural Res	ource Center		
Specific Location		Describe are	ea			
Start Date (i.e. Monday, May 1, 2	015)					
End Date (i.e. Monday, May 1, 2015)						
Time		FROM:	AM/P	M TO:		AM/PM
Equipment Needed						
Chairs, Tables, projector, etc.						
(Some equipment may be assessed	la fee for					
use)						
Set up Time Needed?	• • • • • • • • • • • • • • • • • • • •	Ycs / No				
Set up Date / Time		Date for Set up Time				
For School District Use Only						•••
Custodian Assigned						
Key/Access Card Assigned						
Category	ONE	TWO	THREE			
Charges						
DISTRICT USE - APPLICATION PROCESS						
Received date and time			Ref eren	ce Number Assigned	l	
Date Scanned to School						
Certificate of Insurance Received?				· ·		
Date Approval received from School						
Date Scanned to Superintendent for Exception Approval Date scheduled on Outlook						
Process Complete Date Approved Denied						_
Date Approval/Denial sent to applicant						