

EASTSIDE HIGH SCHOOL USE OF FACILITY REQUEST

Date of Application: _____ **Date(s) Facility to be Used:** _____
Facility Needed From: _____ AM PM **To:** _____ AM PM
Event Starts: _____ **Expected Attendance:** _____
Rehearsl Date(s): _____ **Time:** _____ AM PM

<u>Check Desired Facility</u>	<u>Item</u>	<u>Quantity</u>
<input type="radio"/> Theater (requires Theater Mngr approval)	Chairs	_____
<input type="radio"/> Choral Room	Tables	_____
<input type="radio"/> Band Room	Projector	_____
<input type="radio"/> Cafeteria	Lectern	_____
<input type="radio"/> Classroom(s) _____	PA System	_____
<input type="radio"/> Gym (small) <input type="radio"/> Gym (large)	(If requesting sound other than in Theater submit a request directly to ASB)	
<input type="radio"/> Stadium		
<input type="radio"/> Football Field/Track		
<input type="radio"/> Shower & Locker Rm	<input type="radio"/> Main Quad <input type="radio"/> Quad Stage	
<input type="radio"/> Baseball Field (JV) <input type="radio"/> Baseball Field (V)	<input type="radio"/> Library	
<input type="radio"/> Softball Field (JV) <input type="radio"/> Softball Field (V)	<input type="radio"/> Career Center	
<input type="radio"/> Soccer Fields	<input type="radio"/> Staff Lounge	
<input type="radio"/> Practice Field behind Stadium	<input type="radio"/> Other: _____	

Outside organizations will need to provide a policy naming the Antelope Valley Union High School District, their officers, agents, employees and volunteers as additionally insured in the amount of one million dollars. Coverage must be for the date(s) of use.

Name of Organization: _____ **E-Mail:** _____
Purpose: _____
Address: _____
Day Number: _____ **Evening Number:** _____ **Cell Number:** _____
Authorized Representative(s): _____

Please Note: Any Student Project requiring facilities or funds must be run through an approved on-campus club.

An admission fee, collection, solicitation of funds Will Will not be made.

Amount: _____ Proceeds will be used for: _____

ASB Sound System Requested: Yes No (Please fill out ASB request form)

Security if required: Yes No (Security is required for all events with group attendance. Clubs will be responsible to cover the cost.)

Custodian: yes No (If events take place outside the work week, it is the club's responsibility to cover the cost of custodians.)

We hereby certify that we shall be personally responsible, on behalf of our organization, for any damage or unnecessary abuse of school building, grounds, or equipment, growing out of the occupancy of said premises by our organization. We agree to abide by and enforce the rules and regulations of the Antelope Valley Union High School District governing the non-school use of buildings, grounds, equipment as attached to the applicant's copy. The sponsoring club will be responsible for covering any and all expensed related to this event and use of school facilities. The undersigned also has signed a statement of information. Once the event has been approved, a signed copy will be returned.

Signature of Authorized Representative (Advisor)	Student Representative (President of Club)	Signature of ASB Advisor	Signature of VP Activities
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Principal's Signature