Davenport School District Application for Use of School Facilities

Mailing Address:		Contact Person: Phone:			
					High School: Classroom(s) Classroom(s) Classroom(s) Cafeteria w/kitchen Cafeteria w/o kitchen Cafeteria w/o kitchen Library Playground Other (including special equipment needs)
Date of Use: Time of	Use: Will adm	nission be cha	arged OYes ONo	(see fee guidelines)	
Type of event (please be specif	fic)				
	provided for any youth program ury Policy (attached) MUST also		•		
Event will be supervised by:		Phone:	Emergency F	Phone:	
If keys are necessary, please m	ake arrangements with Joe Cop	persmith.	Keys were given?	O Yes O No	
Please note: District activities,	events are our first priority and	l will take pre	ecedence over outside	requests.	
described above and certifies that he/she has the authority tand regulations of the Davenpeschool premises and/or proper	hereby makes application to the hat the information given in the o make this request for the apport School District. The applicanty and to hold the Davenport Scant further agrees to reimburse facilities.	e application dicant and ag nt agrees to e chool District	is correct. The unders rees that the applicant xercise the utmost car harmless from all liab	igned further states t will observe all rules te in the use of the ility resulting from the	
Signature: D PLEASE - SUBMIT COMPLETED FORM TO DISTRICT OFFICE FOR PROCE			_ Date of Request: DCESSING		
Fees: Rental/custodial fees (for Please make checks payable to	ound on the back side of this app : Davenport School District		established by the Davank you	venport School District.	
Add'l Charge:	The District reserves the right to charge for custodial services as deemed necessary.				
Approved by:	roved by: Date:				
Signature of Dire	ector of Operations/Maintenanc	ce			