

SHERIDAN COMMUNITY SCHOOLS 24795 N. HINESLEY ROAD SHERIDAN, IN 46069

APPLICATION FOR USE OF ATHLETIC FACILITIES

<u>FOR</u>	SCHOOL	USE	<u>ONLY</u>

Route to:
Athletic Director_____
Bldg. Administrator____
Superintendent____
Facilities Director____
Return to _____

Organization Request	ing Usage:			
Name of Event:				
Contact Person:			Phone:	
Event Date(s):		Time Start ₋		End
Date(s):		Time Start __		End
Requested Areas: _	HS Gymnasium	MS C	iymnasium	ES Gymnasium
_	HS Lockers	MS Lockers Baseball Field Other		ES Lockers Softball Field
_	Football Field			
_	Soccer Field			
Additional Needs: _	Scoreboard	Sour	nd System	Lights
_	Concession	Rest	_	Other
Having read the polic regulations, and to be including ordinary we required to open or o organization using the	ies on use of school face responsible for payme ear and tear. It is under versee a building's usage facility, mileage to and or cleaning time after the	ilities, we agreent of all rental stood that if a ge, the employ d from home ane event in the Signature: _ Address: _	e to the strict fees and dam custodian or ee will receive nd usage site case clean-u	other school employee is e time and a half paid by the e, and that this same rate of
Other \$		Phone: Responsible	e person at tir	me of facility use if
Total Charge \$		other than above organization representative.		
(Make checks payable to She	ridan Community Schools)	Name:		Phone:
The above request do and necessary facilitie		ny athletic pro <u>c</u>	grams of this s	school and is hereby approved
Athletic Director	Building Adminis	trator Sup	erintendent	Facilities Director