



912 S. Greyhound Drive  
 Eaton Rapids, MI 48827  
 Phone: 517-663-8155  
 \*FAX: 517-663-2236

## Facility Use Request

Completed form must be received at least 7 or more working days before requested event date. Fill out form completely and legibly. **Please return this form to the office of the building you are requesting use of.**

**\*INCOMPLETE OR UNREADABLE FORMS WILL NOT BE CONSIDERED\***

Today's date: \_\_\_\_\_

Name of Organization (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Contact phone – Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_

### EVENT INFORMATION

Purpose of Request (type of activity): \_\_\_\_\_

Expected Number of People Attending: \_\_\_\_\_

Is there a charge for admission or participation (registration fee, ticket or product purchase?)    Yes    No

### **Building or Room Requested**

Building	Room	Fee per day (office use only)	Total (office use only)
		\$	\$
		\$	\$
		\$	\$

Functions at Eaton Rapids Public Schools take priority over all other facility uses. Non-school events may be rescheduled or relocated with little or no notice to facilitate school use. Events and activities will not be scheduled on half days, breaks or during conferences. **Gym use is SEVERELY LIMITED December through March.**

### **Event Dates & Times – Including Set up and Clean up**

Date of request	Arrive time to set up	Event Start Time	Event End Time	Leave Building	Brief Activity Description

**Equipment and Materials Needed** *(Be specific. Everything must be included such as tables, chairs, audio/visual etc.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Office Use only**

Circle one:    **Approved**    **Denied**

Total Amount Due:

Signature of Building Administrator \_\_\_\_\_ Date \_\_\_\_\_

