

SEQUOIA UNION HIGH SCHOOL DISTRICT APPLICATION/PERMIT/INVOICE FOR FACILITY USAGE

(SEE BACKSIDE FOR GENERAL RULES)

PERMIT NO:

DATE:

THE FOLLOWING ORGANIZATION THROUGH ITS AUTHORIZED AGENT(S) HEREBY MAKES APPLICATION FOR USE OF FACILITIES AT SITE: _____

The : _____

Name of Organization

Address : _____ NON-PROFIT: YES OR NO

City : _____ State : _____ Zip: _____

1. Agent : _____ 2. Agent : _____

Name of Agent/Individual Requesting Facility

1. Phone : _____ 2. Phone : _____

1. Fax : _____ 2. Fax : _____

1. Email : _____ 2. Email : _____

FIELD/ROOM/BLDG/AREA: _____

NEEDS/EQUIP/SETUP : _____

PURPOSE OF USAGE : _____

BUILDING ATTENDANT REQUIRED? YES OR NO Minimum of 4 hour shifts

NAMES OR TOPICS OF SPEAKERS : _____

ADMISSION FEES : \$ - To \$ ESTIMATED ATTENDANCE :

ARE CONTRIBUTIONS, DUES, REGISTRATION FEES, OR OTHER DONATIONS TO BE RECEIVED?

DATE(S)	DAY OF WEEK	START TIME	END TIME	CALCULATION OF (DAYS X HOURS)	TOTAL HOURS
_____	_____	_____	to _____	_____	_____
_____	_____	_____	to _____	_____	_____
_____	_____	_____	to _____	_____	_____
_____	_____	_____	to _____	_____	_____
_____	_____	_____	to _____	_____	_____
_____	_____	_____	to _____	_____	_____
TOTAL					0.00

*****BELOW THIS LINE-FOR BUSINESS OFFICE USE ONLY*****						NOTES:
TOTAL HOURS :		HOURLY RATE :	\$ -	AMOUNT =	\$ -	
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TOTAL HOURS :		HOURLY RATE :	\$ -	AMOUNT =	\$ -	
ATTENDANT :		HOURLY RATE :	\$ -	AMOUNT =	\$ -	
TOTAL DUE =					\$ -	

TOTAL HOURS : 0

I hereby certify that I have read the applicable Provisions of the California Code, the Rules & Regulations and General Rules of the Board of Trustees of the SUHSD, on the reverse side of this application.

Agent/Applicant/Use: _____ District Approved
Date: _____ Approval Date

FOLLOWING DOCUMENTS & FEES COLLECTED PRIOR TO USE OF FACILITIES

Received Verification of non-profit status (IRS Tax Exempt Letter): _____ Received Certificate of Insurance: _____

Received Approval from Site by: Email/Phone/In Person/Fax By/From: _____ Time: _____ Date: _____

TOTAL PAID: _____ CHECK NUMBER: _____ DATE RECEIVED: _____

SITE & USER EMAILED WITH FINAL APPROVAL: _____ FINAL DISTRICT SIGNED PERMIT TO USER: _____