

Community Relations

Exhibit – Permit for Use of Facilities

Date: _____

Your Organization: _____ Non-Profit: Y / N

Org. Representative: _____

Address: _____

Contact Information: Email _____ Phone _____

Nature of Activity: _____

School to be Used: _____ Date/Time: _____

Facilities Assigned: _____

Additional Equipment Approved: _____

Special Instructions: _____

Charges (all applicable charges must be pre-paid): _____

_____ Total: _____

This permit is granted subject to rules and regulations adopted by the Board of Education of School District 91 and may be cancelled at any time by the District.

Approved By: _____

Superintendent

THIS PERMIT (OR A COPY) MUST BE IN THE POSSESSION OF THE PERSON IN CHARGE DURING THE ACTIVITY.

Copies to:

- 1. Organization** **2. Bldg Principal** **3. Business Office** **4. Bldg Custodian**

Updated: July 21, 2008