

SCHOOL COMMITTEE POLICY

AMESBURY PUBLIC SCHOOLS

Facilities Application Form

KF-E

Organization _____

Individual Responsible (Please sign name) _____ (Please print name) _____

Street _____ Town _____ State _____ Zip _____

Telephone Number _____ Date _____

Email Address(required) _____

School Requested _____

Request of Use Auditorium Lighting Classroom Comp. Labs (Mac or PC)
 Cafeteria Gym Library Fields Other _____

Purpose of Use _____

Date(s) of Use _____ Day(s) of Week _____

Hours of Use (including rehearsals) _____

Is event open to the public? Yes No Cost of admission \$ _____

DO NOT WRITE BELOW THIS LINE (OFFICE USE ONLY)

Custodial Charge \$ _____ Per Hour Date(s) _____ x _____ Hours = \$ _____
(minimum of 3 hours)

Rental Charge: _____ Technical Director: _____ Stage Mgr.: _____

Lighting Charge: _____ Sound Tech.: _____ Spot Light: _____

House Mgr.: _____ Lighting Control: _____ Energy Fee: _____

Total Amount Due: _____

Date Due: _____ Date Billed: _____ Date Rec'd: _____

Approved _____ Rejected _____

Comments: _____

Principal _____ Date _____

Director of Operations _____ Date _____