

Avon Elementary School
STAFF MEMBER REQUEST
 Use of School Facilities Application and Agreement

Office Use Only:

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_____ _____

Staff Member *Emergency Contact Number (mobile)*

By submitting this form, Responsible Party acknowledges receipt of the Avon BOE Regulation R7510 (school website), the Avon Building Use Rules (school website), and agrees to all Rules and Regulations pertaining to the use of Avon School facilities.

Event Title: _____ *Approximate number of attendees:* _____

Event Description: _____

Preferred Location:

<input type="checkbox"/> Classroom #: _____ (Max: Capacity = 30)	<input type="checkbox"/> Cafeteria (Max: Capacity = 100)
<input type="checkbox"/> Media Center / Library (Max: Capacity = 50)	<input type="checkbox"/> Municipal Building Gym (school hours only)

Will the event require special equipment or setup? NO YES - Please complete page 2

Will food or beverages be offered at this event? NO YES - See below

Avon School adheres to a "No Nut" Policy. All food and/or beverage will be personally supervised by the Responsible Party.

Week Day	Month	Date	Start Time	End Time
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Request Special Equipment - *Please review with Head Custodian before submitting request for equipment.*

<input type="checkbox"/> Podium	<input type="checkbox"/> Tables # _____	<input type="checkbox"/> Media Display System	<input type="checkbox"/> Computer	<input type="checkbox"/> Other
<input type="checkbox"/> Stage	<input type="checkbox"/> Chairs # _____	<input type="checkbox"/> Microphone(s) # _____	<input type="checkbox"/> Mobile Sound System	

Office use Only:

Approved _____

<i>Building Administrator</i>	<i>Date</i>	<i>BOE Representative</i>	<i>Date</i>
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Distribution: *Main Office Review* *Sender Notification* *Building Use Calendar* *Hard Copy to Folder*

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Description of Food and/or Beverage Service

Description of Special Equipment or Set Up

Set Up Diagram