

FACILITY USE APPLICATION

Bendle Public Schools
2294 E. Bristol Rd., Burton, MI 48529
810-591-4160

Date of Application _____ Name of Organization _____

Site Requested _____ Person Responsible _____

Room/Area Desired _____ Address _____

Day(s) of Week: M T W TH F ST S City _____ Zip _____

From _____ am/pm to _____ am/pm Phone: Day _____ Evening _____

Beginning Date _____ Email: _____

Ending Date _____ Admission Charge: Yes No Cost \$ _____

Expected Attendance _____

Facilities will be used for the following purpose _____

Will you need custodial services? Yes (If yes, see below) No

Indicate any additional needs (including type of custodial) _____

How will you access building (if using facility during non-custodial hours)? _____

In signing this application the applicant certifies to the Bendle Board of Education:

The applicant and/or person listed in charge of the activity will be present at all times. Students/adults must be supervised at all times. The applicant has been authorized by the group or organization to represent it. School sponsored activities have first priority. The use of school facilities by groups may be canceled when a conflict occurs. Equipment needs will be met only on availability and on a pre-approved basis. The applicant agrees to assume all responsibility for damages or liability of any kind and further agrees to hold harmless the Bendle Board of Education and its employees from any expense or costs in connection with the use of the school facilities under this agreement.

Applicant must have permit at the activity.

Applicants Signature Date

APPROVAL

Community Education Representative Date

Indicate below any additional staffing and times needed

Custodian _____	Rental Fees \$ _____
Building Supervisor _____	Estimated Charges \$ _____
Cafeteria Help _____	Total Amount Due \$ _____
Other _____	Due Date _____ Rec'd _____
Security Clearance _____	
Comments _____	