

MIFFLIN COUNTY SCHOOL DISTRICT
201 Eighth Street
Lewistown, PA 17044

APPLICATION FOR PERMISSION TO USE SCHOOL FACILITIES

_____ hereby makes application for use of school facilities for:
(Name of Group/Organization)

_____ Approximate number persons attending: _____
(Purpose of request)

Organization Category (circle correct class):

Class I: All Pupil, Alumni, Parent and Booster Organizations, etc.

Class II: Local nonprofit groups/organizations where **no** admission or donation is solicited

Class III: Local nonprofit groups/organizations where admission or donation is solicited

Class IV: For profit groups/organizations where **no** admission or donation is solicited

Class V: For profit groups/organizations where admission or donation is solicited

Building Requested: _____

Is there raising of money as a result of the activity or event in the form of admission, tuition, voluntary donations, collections, or the sale of merchandise or amusements? YES NO

If YES, explain how proceeds will be used: _____

Date(s) facility requested (include rehearsals):

Date: _____ Time: _____ (am/pm) to _____ (am/pm)

Date: _____ Time: _____ (am/pm) to _____ (am/pm)

Date: _____ Time: _____ (am/pm) to _____ (am/pm)

Date: _____ Time: _____ (am/pm) to _____ (am/pm)

Dates and times must be listed individually.
(Attach sheet if necessary)

A damage deposit is due prior to the first day of use. \$ _____

**** Fees: Reference Policy 707, Attachment 1 – Schedule of Rates Chart, set by Board of School Directors.**

RENTAL FEES (To be completed by the Principal):

Area(s) Requested: _____

Cost: \$ _____

Cost: \$ _____

Cost: \$ _____

Additional Equipment: _____

Cost: \$ _____

Cost: \$ _____

Cost: \$ _____

ADDITIONAL FEES (To be completed by the Principal):

Event Staff: YES NO QTY

HOURS

RATE

TOTAL

\$ 15.00

\$ _____

Custodial: _____

\$ 26.25

\$ _____

TOTAL ESTIMATE ALL FEES: \$ _____

Invoice No: _____

