## PLEASE COMPLETE THE TOP PORTION OF BUILDING USE FORM

## Holy Hill Area School District 3117 Highway 167, P.O. Box 127 Richfield, WI 53076-0127

## APPLICATION FOR USE OF SCHOOL FACILITIES BUILDING AND GROUNDS

REQUESTS MUST BE RENEWED ANNUALLY		APPLICATION DATE				
1. Name of Organization						
2. Request use ofBUILDING	GROUNDSF	RIESS LAKE ELEMEN	NTARY	RICHFIELD MIDE	DLE SCHOOL	
3. Purpose/Event Type (Describe)		Expected Attendance				
4. Date(s)			_Start Time	End Time		
5. Equipment requested						
6. Name of Supervisor or Group Leader (Must be	e over 21)					
Address		Phone				
THE FOLLOWING RESPONSIBILITIES ARE RE	QUIRED BY GROUPS	WHEN USING THE SO	CHOOL DISTR	RICT FACILITIES:		
> Unless otherwise arranged, all evening ac	tivities must end at 7:45	PM. Groups must be off	f the premises b	by that time.		
Gymnasium Use: ALL participants must change from "street shoes" into gym shoes (non-marking) BEFORE entering the gym.						
The District staff will assist in setting up chairs, tables etc. for each group. It is the responsibility of the person(s)/organization using the facility to leave the area used in its original condition, including garbage removal, sweeping the floor, sponging off tables, etc. If not completed properly, the group will be charged one hour of custodial clean up time.						
If additional snow plowing of the parking lo service.						
FEE POLICY: Non-district groups are char group's permit will be revoked. Mark the Security Deposit: \$100.00 –	necessary area(s) with th	e length of time needed.		•		
The charges are as follows:						
Gym: \$20/hour Kitchen/Cor	ncession: \$20/hour	Library: \$10/ho	ur	Classroom: \$10/hou	r	
Cafeteria/Commons: \$10/hour	Grounds: \$5/ho	our Grounds w/ Bathroom Access: \$15.00				
Custodial: <u>As Needed</u>	Equipment Rental:	_As Needed_	Large	e Group Surcharge:	As Needed	
I, the undersigned, representing my organization, agree to follow the administrative rules and regulations. I understand that if any person is involved in acts of willful or malicious damage to school property and/or contents or if the group's participants are undisciplined, this will result in suspension of the building use permit.						
Full name of responsible party	Street		City	Pr	ione	
ACTION OF SCHOOL DISTRICT - TO BE COM	PLETED BY THE BUIL	DING PRINICIPAL				
Building Use Permit Granted:YE	SNO					
You will be invoiced. Future use subject to	prompt payment.	_You will not be charg	ed for the use	of the room.		
You may use the equipment requestedYou may not use the equipment requested						
Custodial fees to be charged: (To be completed by	/ the office)		K	ey Fob/Code needed	l	
Security Deposit: \$100.00 - Checks made payable	e to HHASD. Security	deposit must be receive	ed prior to use	of the building/groun	<mark>ds.</mark>	
Comments:	Comments: Room(s) Assigned:					
Administration Signature:	Administration Signature: Date:					
FOR OFFICE USE ONLY: Security Deposit received – Check # Building Use Regulations signed/received Invoiced		ey Fob/Code provided				
Requesting Agent Building Custon	dianSecretary	Athletics	_ Statt	HD (deposit)	_ LB (Invoice)	