

HENRY HUDSON REGIONAL SCHOOL
FACILITY USE REQUEST

Persons or organizations requesting the use of any school facility must furnish the following information, a copy will be returned indicating approval or disapproval of your request. **If you are requesting the use of the building and/or grounds and it is not normal school hours, a fee will be incurred to cover custodial costs.**

Organization/Contact Person _____ Date: _____

Address _____ Phone: _____

FACILITY REQUESTED

Cafetorium Classroom Music Room Gym
 Computer Lab Media Center Other (Specify) Athletic Fields

AV/TECH EQUIPMENT (check):

LCD Projector Laptop Only Laptop w/Sound VCR Internet
 CD Player Sound Microphone DVD Player Other

OTHER EQUIPMENT NEEDED (Please specify piano, stage lights, tables, chairs, etc.)

If special arrangements are necessary, please contact our Building and Grounds Supervisor after you receive approval.

Date Requested: _____

Entry Time: _____

Purpose for which facility will be used: _____

Will admission be charged: _____

Attendance Expected: _____

I understand that all activities must be in compliance with Henry Hudson Regional Board of Education Policy and approved by the Board of Education. A Certificate of Insurance indicating Henry Hudson Regional as named insured and a Hold Harmless Agreement must be received prior to the event.

Signed: _____ Title _____

Principal: _____ Date(s) Available: Yes _____ No _____

Superintendent: _____ Approved _____ Rejected _____

Date of Board of Education Approval _____

Date of Receipt of Certificate of Insurance & Hold Harmless Agreement _____