## Facility Use Request

Completed form must be received 10 or more working days before requested event date. Fill out form completely \& legibly.

- INCOMPLETE OR UNREADABLE FORMS WILL NOT BE CONSIDERED -


## CLIENT INFORMATION

Organization Name:

Mailing Address: $\qquad$ city

## E-Mail Address:

-Evening:
Contact Name: $\qquad$ : Contact Phone - Daytime:

## NONPROFIT

ORGANIZATIONS \&
BUSINESSES: Please send us a copy of your State of Michigan Business License or Nonprofit Status forms.

EVENT INFORMATION
Proposed Use:
Building Choice: $\qquad$ Room Choice:

Expected No. Persons Attending: $\qquad$ Percentage who are Holt Public Schools District residents: $\quad 51 \%+$ O $20 \%-50 \%$ O unknown $O$ Is there a charge for admission or participation (registration fee, ticket or product purchase)? YES O NO O Event Dates \& Times - Including Setup \& Cleanup: continue on back if necessary.

| DAY | MONTH | DATE | YEAR | ARRIVE TO <br> SET UP | EVENT <br> START <br> TIME | EVENT <br> END <br> TIME | LEAVE <br> BUILDING | BRIEF ACTIVITY DESCRIPTION |
| :--- | :--- | :--- | :--- | :--- | :---: | :---: | :---: | :---: |
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Will you be serving/selling food? YES ONOO
Do you need to use a kitchen? YESO NOO
Do you need catering services? YESONOO

If you have a room setup diagram or any additional notes or information to include please fax this information to (517)-699-3439 or scan and email to tes@hpsk12.net. Please include necessary contact information with these documents.

Equipment Needs: Please use blanks to list additional items, or list them on the back of the page.

| ITEM | QTY | ITEM | QTY | ITEM | QTY |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Chairs, Folding |  | Lectern |  |  |  |
| Tables, Folding, <br> banquet, rectangular 8' |  | Microphone/PA <br> system |  |  |  |
| Tables, Folding, <br> banquet, round 5' |  | TV |  |  |  |
| Tables, Folding, <br> cafeteria-style |  | VCR |  |  |  |
| Coat Rack | DVD |  |  |  |  |
| Stage sections, 4'x8' <br> ea. |  | Overhead <br> Projector |  |  |  |
| Choral Risers |  |  |  |  |  |

SUBMISSION OF THIS FORM DOES NOT ASSURE FINAL APPROVAL OF YOUR REQUEST. Approved functions will be issued a use permit: BE SURE TO HAVE YOUR FINAL PERMIT WITH YOU WHEN YOU ARRIVE FOR THE START OF YOUR FUNCTION.

Functions of the Holt Public Schools take priority over all other facility uses. Non-school events may be rescheduled or relocated with little or no notice to facilitate school use. Events and activities will not be scheduled on half-days, breaks or during conferences. Some spaces are available for use only by Holt Public Schools. Gym use is SEVERELY LIMITED December through March.

Return completed form and attachments to the Scheduling Office at the above address via fax, mail, or email

