Boscobel High School 300 Brindley Street Boscobel WI 53805

## **Building Use Request**

Please Read Attached Policy 7510

Phone: 608-375-4161 Fax: 608-375-2640

Please make checks payable to Boscobel Area Schools

Section 1 Name of Organization: Football Club	Date: 9/21/202
Person Responsible: Dustin Johnson Phone: 4	608-574-7679
Address: Biscobil M5/HS	
Room/Facility Requested: Bullday Cafe Type of Activity: 1  Date Needed: 9/24 \$ 10/1 \$ 10/8 \$ 10/15 \$ 10/2 \$ Time: 5:15 PM	cotball Meal
Date Needed: 9/34 = 10/1 = 10/8 = 10/15 = 10/2 = Time: 5:15 PM  (Include set up time and tear down time if applicable) NOTE: A custodian will be required for a	
List all equipment needed (Bleachers, chairs, etc.):  Cateforia Lables   6 white tables	
Will your organization sell concessions? NO Will your organization charge admission or take up a collection? Have arrangements been made for proper security? NO	
Section 2	200
I acknowledge that I have received a copy of policy 7510-Use of District Facilities and	Will abide by its content.
Signature of Building Use Requestor  Date	701/
Signature of Building Administrator Date	
Signature of Building Administrator Date	Rulzo
Signature of Athletic Director  Date	
Signature of District Administrator Date	
Section 3 – Billing         Building Use Fee (Prepaid)       Custodian/Cafeteria Worker (Billed After Event)       Other (Specify)	No Charge
Section 4 — This section will be completed after the date of your activity and mailed to you for billing purposes, if applicable.	
Prepaid Building Use Fee:	= \$
Custodian/Cafeteria Worker Name: Hours X \$ per hour	= \$
Other Charges: Total Amount Due:	= \$ = \$