

Boscobel High School
300 Brindely Street
Boscobel WI 53805

Building Use Request

Please Read Attached Policy 7510

Phone: 608-375-4161
Fax: 608-375-264

Section 1

Name of Organization: Youth Wrestling Date: 10-27-20

Person Responsible: Todd Bell Phone: 391-0650

Address: Boscobel Wi

Room/Facility Requested: Bulldog Cafe Type of Activity: Meeting

Date Needed: 10-27-20 Time: 6:30 PM to 8:00 PM
(Include set up time and tear down time if applicable) NOTE: A custodian will be required for all building use requests.

List all equipment needed (Bleachers, chairs, etc.):

Just tables to sit at for about 15 people

Will your organization sell concessions? No

Will your organization charge admission or take up a collection? No

Have arrangements been made for proper security? No

Section 2

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

Wally Byrne

Digitally signed by Wally Byrne
Date: 2019.09.24 07:45:51 -05'00'

Date

10-21-20

Signature of Building Administrator/Athletic Director

Date

Signature of Maintenance/Custodial

Date

Board Approval (if applicable)

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: = \$ _____

Please make checks payable to Boscobel Area Schools

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Subject: [Illegible]

Case Number: [Illegible]
File Number: [Illegible]

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