

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: School Counselor Date: 9-23-19

Person Responsible: Rhonda Scallion Phone: 485-0610

Address: 300 Brindley St.

Room/Facility Requested: Bulldog Cafe Type of Activity: Scholarship presentation

Date Needed: Monday, Oct. 28 Time: 6:00 PM to 7:00 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.): 12 tables & chairs, podium, microphone, white table up front + white table in back, screen

stage screen

white table podium

0 0 0 0

0 0 0 0

0 0 0 0

1 white table

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.

R Scallion
Signature of Building Use Requestor

9-23-19
Date

W. Atto
Signature of Building Administrator/Athletic Director

9-23-19
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