

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 Scallon Phone: 485-0610

Address: 300 Brindley St.

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

Date Needed: Monday, Oct. 7 Time: 6:00 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.):

12 tables + chairs, podium, microphone, white table up front + white table in back for refreshments, screen

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

stage (screen)
white table podium
white table

Section 2

I acknowledge that I have received a copy of policy 7510-Use of District Facilities and will abide by its content.

R Scallon
Signature of Building Use Requestor

9-23-19
Date

W. Otto
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