

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

## Section 1

Name of Organization: Middle School Student Council Date: 2-28-2020

Person Responsible: Susan Beck Phone: Ext 2341

Address: MS Hallway

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

Date Needed: 2-28-20 Time: 3:20 PM to 8:15 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.): Table for concessions  
Chairs/Tables in back for those who want to play game  
Cones to mark off dance area  
gates in hallway to limit kids to cafeteria + bathrooms.  
Will your organization sell concessions? ~~NO~~ yes  
Will your organization charge admission or take up a collection? NO  
Have arrangements been made for proper security? ~~NO~~ yes - wally will be present we decided the police didn't need to be present.

## Section 2

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

Susan Beck  
Signature of Building Use Requestor

2-5-2020  
Date

\_\_\_\_\_  
Signature of Building Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
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:** = \$ \_\_\_\_\_

Please make checks payable to Boscobel Area Schools