

Boscobel Elementary School
200 Buchanan Street
Boscobel WI 53805

Building Use Request

Please Read Attached Policy 7510

Phone: 608-375-4165

Fax: 608-375-4197

Section 1

Name of Organization: Boscobel Rec Date: 3-4-20
Person Responsible: Heather Puckett Phone: 608-485-1456
Address: 1001 Wisconsin Ave
Room/Facility Requested: Big Gym Type of Activity: Basketball
Date Needed: June 29 - July 29 Mon - Thur Time: 9am to 1pm
(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.): mens + womens basketball

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.

Heather Puckett 3-4-20
Signature of Building Use Requestor 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