

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 Dept Date: 3-4-20

Person Responsible: Heather Puckett Phone: 608 485 1456

Address: 1001 Wisconsin Ave

Room/Facility Requested: Big gym Type of Activity: Volleyball

Date Needed: June 29-July 29 T+Thurs Time: 3pm to 5pm
(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.): Volleyball nets, poles, and balls

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
Signature of Building Use Requestor

3-4-20
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