



**FOREST AREA SCHOOL DISTRICT**  
 22318 Route 62, Box 16, Tionesta, Pennsylvania 16353-9307  
 Amanda E. Hetrick, Superintendent  
 (814) 755-4491 Fax: (814)755-2426

**FOREST AREA SCHOOL DISTRICT  
 REQUEST FOR USE OF SCHOOL FACILITIES**

Date Received: \_\_\_\_\_

Person Responsible: _____ Team, Class, or Group: _____ Address: _____ Phone Number: _____ Email: _____
--

Date (s) of Usage: \_\_\_\_\_

Internal Use \_\_\_\_\_

Board Approval Needed \_\_\_\_\_

- Please note if use of the building is needed the day before the event.

Intended Usage: \_\_\_\_\_  
 \_\_\_\_\_

**Times Of Usage:**

Set Up Time: \_\_\_\_\_ User is responsible for setting up.

Event Time: \_\_\_\_\_ To \_\_\_\_\_

Clean Up Time: \_\_\_\_\_ User is responsible for tearing down, cleaning up, and trash removal under the direction of District custodians.

**Facility Requested:** EFE \_\_\_\_\_ EFH \_\_\_\_\_ WFE \_\_\_\_\_ WFH \_\_\_\_\_

**Access will be through only one door:**

\_\_\_\_\_ East Forest – Front Door

\_\_\_\_\_ West Forest – Front Door

\_\_\_\_\_ WF High School Gym Door

\_\_\_\_\_ WF Elementary Gym Door

\*All other doors will remain locked.

**Space Requested:**

- \_\_\_ Kitchen (must employ a district employee – fee for kitchen use)
- \_\_\_ Cafeteria
- \_\_\_ High School Gym
- \_\_\_ Elementary Gym
- \_\_\_ Classroom Space
- \_\_\_ Library
- \_\_\_ Stage
- \_\_\_ Other (Please Specify) \_\_\_\_\_

**Equipment Needed:**

- \_\_\_ Access to copier – (must have principal signature) \_\_\_\_\_
- \_\_\_ Sound Equipment
  - \_\_\_ Microphone – Cordless
  - \_\_\_ Microphone – Lapel
  - \_\_\_ Microphone Stand
- \_\_\_ Podium

- |                      |                                 |
|----------------------|---------------------------------|
| ___ Technology       | ___ Gym Equipment (Please list) |
| ___ Projector        | _____                           |
| ___ Projector Screen | _____                           |
| ___ Laptop           | _____                           |
| ___ Internet Access  | _____                           |
| ___ Speakers         | _____                           |

- \_\_\_ Refrigerator
- \_\_\_ Cooler
- \_\_\_ Freezer
- \_\_\_ Tables - # requested \_\_\_\_\_
- \_\_\_ Chairs - # requested \_\_\_\_\_
- \_\_\_ Other - \_\_\_\_\_

**\*All equipment must be returned in same condition as issued to you.  
Custodians are not authorized to grant access to any other part of the building not requested on this form.**

I understand that I am responsible for the appropriate behavior of those present at the scheduled event(s) and the conditions of the facility and equipment when the event is finished. If anything unforeseen happens during the course of this scheduled event, it will be reported to the school administrator and I/we will assume the financial responsibility for restoring the facility to its original condition.

Signature of Applicant \_\_\_\_\_

Principal Signature \_\_\_\_\_

Business Manager \_\_\_\_\_

Superintendent \_\_\_\_\_

WF Maintenance \_\_\_\_\_

EF Maintenance \_\_\_\_\_

For District Use Only	
_____	Free Usage
_____	Rental Fee
_____	Custodial Fees
_____	Cafeteria Fees

\*Pertains to Forest Area School District Policy 707  
(Revised 3/2016)