Schedule #	
Invoice #	

APPLICATION FOR USE OF SCHOOL FACILITIES GOODRICH AREA SCHOOLS

(Please allow 10 business days for application/permit processing)

The following application must be completed prior to using any district facility. Detailed procedures are identified in Goodrich Area Schools Facility Usage policy and procedures guidelines. This information is available at school offices and on the Goodrich District website at www.goodrichschools.org.

□ Group I − Payment Exempt Users									
☐ Group	o II – Commi	unity roups/Nor	n-Profits	Group III -	- General Users				
Organization	Name				Date				
Name of Coa	ch or Repres	entative (must	be 21 or over)						
Street Addres	SS		City		Zip code				
Phone Number	erc								
Thoric Hamb									
Email Address	S								
Activity	List	Dates of Use (a	attach additional li	ist if needed)					
			to						
Time of Event			Reserve Time		of participants				
Té ampliante.		ota Tua an /Da ale	/Day Number						
т аррисаріе,	please indica	ite Troop/Pack,	/Den Number						
PLEASE CIR	CLE YOUR	REOUESTS							
	Reid	_	Middle School	High Coho	ool Auditorium				
Building:				rigii Sch	ool Auditorium				
	Pavilion	Athletic C	omplex						
Space:	Room #_	Room # Gym Ca		ľ	Media Center				
	Kitchen	Tech Lab	Parking Lot	Hallway	s Athletic Field				
	Concessio	n Tennis	Courts Res	strooms					
	0.1								

Services:	Aud. Techs	Aud. Supervisor	Food Service Employee							
	Media Tech	Athletic Stadium	Supervisor	Custodian/Maint	enance					
	Other									
Special Needs/Equipment		Lunch tables w/se	ats Table	s (8 ft banquet)	Chairs					
	Garbage Cans	Microphone Musical		(please specify)						
	Athletic Equip									
Special Custo	dial Instructio	ns:								
The following of	locuments are du	ue on or before you	r scheduled eve	nt:						
	 Proof of Insurance signed Hold Harmless Agreement 									
		signed floid flan								
for clean up an period. It is ur charge. The period is the period in the	d any damage to nderstood that th ersonnel are scho illed for all servio	zation and/or group o equipment or roor e kitchen facilities, eduled at the time of ees prior to use. I a	m that may occu if used, must ha of approval thro	or during the above we a cafeteria emp ugh the permit pro	stated use loyee in cess. The					
Applicant's Sign	nature			Date						
Permit#		Invoice# Ch	neck#	Total	Date					
Permission is hereby granted to the above named group to use the facilities.										
Authorized	Signature			Date						