

Arcanum-Butler Local School District

**2011 Trojan Ave.
Arcanum OH 45304**

**937.692.5174 phone
937.692.5959 fax**



REQUISITION FOR BUILDING USE

Event _____

Purpose of Event _____

Date(s) of Event _____

Actual event times (from/to) _____

Times required for building access (from/to) _____

Building requested: Main Campus PS/Fieldhouse

Rooms requested _____

Additional dates of building use pertaining to meeting (set-up, practice, etc.) _____

*To avoid conflicting use of building, all dates and times of building use must be on this form.

Special requests (room set-up, equipment needed, etc.) _____

Organization _____

Requested by _____
Print name Signature*

Address _____

Phone _____ Date _____ Email _____

Check one: Nonprofit community organization
 Private citizen or company

*Note: Signature indicates acceptance and agreement by the user to abide by the following conditions of school building use:

- User assumes responsibility for the behavior and agrees to procure adult supervision of all persons associated with the activity.
- User agrees to limit access and use of school facilities and equipment to the approved above, and to only those persons associated with the activity.
- User agrees to place back in order equipment and building areas used at the conclusion of the activity, to provide adult supervision until the last person leaves the building, and to secure the building premises or communicate such with school personnel on duty.
- Other such conditions that may become necessary after the activity commences.

Building Use Request

Approved Denied _____
Principal / AD / Supervisor Signature Date

Approved Denied _____
Superintendent Signature Date

School Facility Use Agreement Required Yes No If required, date received _____