

**FILLMORE CENTRAL PUBLIC SCHOOLS
FACILITY REQUEST FORM**

Please return this form to:

High School

145 Main Ave S.
Harmony, MN 55939
(507) 886-6464
(507) 765-9870
Fax (507) 886-6642

Elementary School

702 Chatfield St.
Preston, MN 55965
(507) 765-3809
(507) 886-2789
Fax (507) 765-2367

NOTE: YOUR DATE IS ONLY TENTATIVE UNTIL YOU RECEIVE AN APPROVED COPY OF THIS FORM.

Organization: _____
 Event/Activity: _____ Date (s) Requested _____
 Liability Insurance Carrier* _____
 Policy # _____ Organization Contact _____
 Address: _____ Phone: _____
 Email: _____

**Copy of Insurance Binder/Policy to be attached*

REQUEST/ACTIVITY SPECIFICS

Building HS /ES/Room Requested: _____
 Equipment Requested: _____
 Time of Event: _____
 Time for Set-up (if required) _____
 Supervisor (Name & Phone #) _____
 Approx. # of Attending: _____
 Set Up Requests: _____

<p>Rental Fee: See User Policy</p> <p>Class I-Not Applicable _____ Class II-Amount _____ Class III-Amount _____ Uninsured User _____ Fee Amount _____</p>	<p>\$50 Deposit Due Prior To Event</p> <p>Received-Date _____ Received-Date _____ Not Returned _____ Not Applicable _____</p>	<p>Bldg. Supervisor/Custodial Fee:</p> <p>Note: Bldg. Supervisor fee is required for all tournaments & other activities open to the public.</p> <p>_____ \$15 Per Hr., Per Event SUPERVISOR _____ \$20 Per Hr., Per Event CUSTODIAL _____ Not Applicable</p>
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I (We) undersigned, understand and agree to abide by the conditions set forth by the "Utilization of School Facilities and Equipment" Application -Fillmore Central School Board

Signature of Applicant _____ Date _____

Total Amount Due: _____ Date Received _____

Signatures of Authorization

Building & Grounds Director Signature _____ **Date** _____

Administrator Signature _____ **Date** _____

Copies To:

Building Administrator, Applicant, Building & Grounds Director