

GREATER NANTICOKE AREA

SCHOOL DISTRICT

427 Kosciuszko Street
Nanticoke, PA 18634
Telephone: (570) 735-7783

APPLICATION FOR USE OF PROPERTY AND/OR FACILITIES

DATE: _____ **Contact Person:** _____
Signature: _____
Phone: _____

NAME OF ORGANIZATION: _____

REQUESTED BY: _____

TYPE OF ORGANIZATION: _____

TYPE OF PROGRAM OR EVENT: _____

BUILDING REQUESTED: _____

PLEASE NOTE: Certificate of Liability Insurance must be attached or forwarded prior to requested date.

FACILITIES REQUESTED (Check all that apply)

AUDITORIUM	<input type="checkbox"/>	PROJECTOR	<input type="checkbox"/>
CLASSROOM	<input type="checkbox"/>	SCREEN	<input type="checkbox"/>
GYMNASIUM	<input type="checkbox"/>	PIANO	<input type="checkbox"/>
LIBRARY	<input type="checkbox"/>	ORGAN	<input type="checkbox"/>
CAFETERIA	<input type="checkbox"/>	CHAIRS (no.)	<input type="checkbox"/>
ATHLETIC FIELD	<input type="checkbox"/>	TABLES (no.)	<input type="checkbox"/>
MICROPHONE	<input type="checkbox"/>	SECURITY	<input type="checkbox"/>

DATE OF EVENT: _____ FROM: _____ TO: _____

DATE OF PRACTICE SESSIONS : _____ FROM: _____ TO: _____

SPECIFIC PURPOSE OF EVENT: _____

ADMISSION FEE (IF APPLICABLE) CHILDREN: _____ ADULT: _____

PURPOSE FOR WHICH FUNDS WILL BE EXPENDED: _____

I REQUEST THE USE OF THE BUILDING AND/OR FACILITIES ON A WEEKEND AND REALIZE THAT I WILL BE REQUIRED TO PAY HOURLY CUSTODIAL RATES.