White Hall School District Facility Request
for School Sponsored Events

Date of Request: _____

School Organization Requesting the Facility: _____

Name of Contact Person: _____

Telephone: _____

Email: _____

Please Choose the Location of your Event:

- ☐ Hardin Elementary
- ☐ Gandy Elementary
- ☐ Moody Elementary
- ☐ Taylor Elementary
- ☐ White Hall Middle School
- ☐ White Hall High School

Facility Requested:

- ☐ Cafeteria
- ☐ White Hall Middle School Gymnasium
- ☐ White Hall Middle School Auxiliary Gymnasium
- ☐ White Hall High School Bert Honey Gymnasium
- ☐ White Hall High School Auxiliary Gymnasium
- ☐ White Hall Performing Art Center

Alternate Facility: _____

Description of activity/event including equipment and staff needs:

Event Start Date: _____ **Event End Date:** _____

Setup Start Time: _____

Event Start Time: _____

Event End Time: _____

Clean-up/Breakdown Time: _____

Will tickets be sold or donations accepted at this event? Yes ☐ **No** ☐

If yes, please explain _____

IT IS UNDERSTOOD BY ALL PARTIES THAT THE PERSON SIGNING THE REQUEST AGREES TO THE FOLLOWING CONDITIONS:

1. **The facility request be received in the superintendent's office no later than the Thursday prior to the board meeting.**
2. **No event shall be held without approval of the campus principal and the superintendent.**
3. **The responsible party must provide proper supervision to ensure that the facility is well kept and accepts responsibility for any damage to the property.**

_____ _____ _____

Responsible District Employee **Campus Principal** **Superintendent**

Date Approved: _____