Questions?
Contact:
Bill Davis
Facility Manager
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Application for Use of School District Facilities and Grounds

Date of Application: _____

Applicant/Organization: _____

Type of Organization: __Youth Non Profit __Adult Non Profit
__ For Profit __Gov. Agency

Description of Activity: _____
_____
_____

Specific Facility/Grounds Requested: _____

Alternate Facility/Grounds Choice: _____

Special Request (i.e. sound system, tables, chairs, etc.): _____
_____
_____
_____

Date(s) Desired: _____ End Date: _____

Time(s) Desired: _____

Contact Information Name: _____

Address: _____

Phone: _____

Email: _____

CRSD Sponsor Signature: _____

I certify that I have read the district facility use handbook (http://www.twardoski.com/crsdpolicy/OpenBook.aspx?BookID=22&BookName=Facility%20Use) and I am prepared to be the responsible agent for the organization I represent.

_____ _____
Signature of Applicant Date

Bill Davis davisbi@cleelum.wednet.edu 509-649-4853
Facilities Manager