



District Facility & Equipment Use Oklahoma City Public Schools

Completed by School Administrator

Is proposed use for district business only? YES		NO			
Is proof of insurance provided? YI	ES NO				
Item description:					
Borrower Name:					
Address:					
Phone #:					
Date Loaned:	Date Returned:		Condition upon return:		
Signature of Applicant: :	t: : Date:				
Approval of School Administrator:			ate:		

Application for Use of Facilities or Athletic Fields

Completed by Applicant

Date of Application:	School Site/Roo	oms to be Used:					
Applicant Name:							
Address:							
Phone #:							
Group Name:							
Group Address:							
Group Phone #:							
Activity Description:							
Dates of Use Start Date: End Date:	Time of Use:						
Will entry fees be charged? YES NO Is this event for fund raising? YES NO What will the funds be used for? YES N Does the Group have insurance coverage? YES Applicant agrees to have an adult supervisor on site	IO NO e at all times: YES	NO					
Responsible Adult Supervisor: Name: Phone #:							
Signature of Applicant: Date:							
Completed by Central Office							
Class of Applicant/Activity: I II III IV		Applicable Fee Schedule: I II III IV					
Hourly Base Fee: \$							
Adjust for Fund Raising Activities: Adjust to Class IV							
Adjust if Air Conditioning is Required: 1.5 Base Rate	\$						
Total Hourly Base Fee: (2 hour minimum)							
Additional Fees Completed by School Administrato	o <mark>r</mark>						
Charges for chair set up:				\$			
Charges for lighting set up:				\$			
Charges for moving furniture or equipment and/or	\$						
Labor Fees:	N/A	\$					
Custodial Services:	N/A	\$					
Kitchen Staff:	\$						
Additional School Supervisors:	\$						
Security Services:	int	N/A	\$				
Total Fees:	\$						
Signature of School Administrator:		Date:					