



800 Oakesdale Ave SW • Renton, WA 98057 • 425-917-7658 • 425-917-7659
Please email application to Hector Donis (hdonis@psesd.org) or Pat Alfonso (palfonso@psesd.org)

FACILITY USE RENTAL APPLICATION

GROUP/ORGANIZATION: _____

CONTACT PERSON: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

FAX: _____ EMAIL ADDRESS: _____

ALTERNATE CONTACT PERSON: _____ PHONE: _____

BUDGET CODE (FOR INTERNAL STAFF ONLY) : _____

EVENT NAME: _____ NUMBER OF ATTENDEES: _____

DAY(S) OF THE WEEK: _____ DATE(S) : _____

**STANDARD SET-UP TIME ALLOWS 30 MINUTES PRIOR TO EVENT FOR GROUP TO GET INTO ROOM TO GET READY FOR EVENT. DO YOU NEED MORE THAN 30 MINUTES? _____

IF YES, HOW MUCH TIME ARE YOU REQUESTING? PLEASE BE SPECIFIC: _____

ROOM START TIME: _____ ROOM END TIME: _____

EVENT START TIME: _____ EVENT END TIME: _____

SPECIAL REQUESTS (ie. ADA, space issues, etc.): _____

EQUIPMENT REQUESTED:

___ WIRELESS HANDHELD MICROPHONE

___ LCD PROJECTOR

___ WIRELESS INTERNET

___ ADA ADJUSTABLE TABLE

___ DOCUMENT CAMERA

___ K-20 POLYCOM*

___ OTHER:

___ FLIP CHART STAND

___ SPEAKERPHONE

* PLEASE COMPLETE SEPARATE K-20 POLYCOM FORM

