



JOSEPH SEARS
EST. 1899

Calendar Event and/or Room Reservation Request

Please submit your completed form to Laura Wise (in person or via email lwise@kenilworth38.org)

Name of Event: _____ Audience: _____ Number of Attendees: _____

Event Date(s): _____

Start Time of Event: _____ a.m./p.m. End Time of Event: _____ a.m./p.m.

Alternate Event Date(s): _____

Contact Name: _____

Name of Organization: _____

Primary Phone: _____ Alternate Phone: _____

Email Address: _____

Preferred Venue: AUD AUDFYR FH GYM LTC HUB ODC L
 Other _____

Alternate Venue: AUD AUDFYR FH GYM LTC HUB ODC L
 Other _____

Venue Abbreviations: Nygaard Auditorium (AUD); Nygaard Auditorium Foyer (AUDFYR); Faculty Hall (FH); Gymnasium (GYM); Library Technology Center (LTC); Learning Hub (HUB); Outdoor Classroom (ODC); The Lounge (L)

Receipt or acknowledgement of this form does not negate the need for additional completed forms and agreements required for outside groups requesting to use facilities. Those additional forms and agreements must be obtained from and submitted to the District, School and Business Office.

For Office Use Only:

Administrator Review and Approval: _____ Date: _____

- List on District/School Website Calendar Send Confirmation Email to Requestor

Revised 10/12/21