

BUCKS COUNTY TECHNICAL HIGH SCHOOL
BUILDING USAGE FOR BCTHS EMPLOYEES

EVENT / GROUP DATE OF REQUEST

CONTACT PERSON /SUPERVISOR Phone Extension

Event Date(s) Requested: _____

Type(s) of Room(s) needed:

Room: _____ Time of actual event: _____

Time for main lobby doors to be unlocked: _____

Time for main lobby doors to be locked: _____

Group Size: _____

A.V. Equipment needed: _____



To be completed by the Adult Education Office:

Building Calendar Checked: _____ Date: _____

Adult Education Office Approval: _____ Date: _____

Event on Calendar/Web Site: _____



- Copies: Business Office
- Building Grounds Supervisor
- Originator
- Room Staff
- Supervisor