

**BROWNSBORO ISD**  
**Facility Rental Application**

(All information needs to be filled out before processing)

Name of Organization:

Address to invoice:

Facility requested:

Type of facility (gyms, classrooms, etc):

Date(s) requested:

Time Requested: Begin time:

End time:

Total Hours:

Purpose of Use:

Contact Person:

Telephone #:

Address:

City, State, and Zip:

Email address:

**Fees: (For District Use Only)**

Total rental fees: \$ \_\_\_\_\_

Paid: \$ \_\_\_\_\_

*Signatures required after both parties agree on fees:*

\_\_\_\_\_  
Party Requesting Facility Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Representative Signature

\_\_\_\_\_  
Date

Contact: Key Duke at 903-852-7121 or [dukek@gobearsgo.net](mailto:dukek@gobearsgo.net)

Cc: \_\_\_\_\_ Housekeeping

\_\_\_\_\_ Grounds

\_\_\_\_\_ Maintenance