

LEHIGHTON AREA SCHOOL DISTRICT  
Lehigh, Pennsylvania  
APPLICATION FOR USE OF SCHOOL PROPERTY

- Reminder: (1) Applicant must meet with principal or designee not less than fourteen (14) days prior to facility use and present completed application.
- (2) Applicant must present proof of insurance seven (7) days prior to facility use.

Application Date: \_\_\_\_\_

1. Name of Responsible Person : \_\_\_\_\_ Group Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

2. Building Requested:  
 \_\_\_\_\_ Elementary Center \_\_\_\_\_ Middle School  
 \_\_\_\_\_ High School \_\_\_\_\_ Old Stadium (Beaver Run Rd)  
 \_\_\_\_\_ Multi-Purpose Stadium \_\_\_\_\_ Other \_\_\_\_\_

Facilities Needed:  
 \_\_\_\_\_ Gym \_\_\_\_\_ Outside Fields \_\_\_\_\_ Classrooms # \_\_\_\_\_  
 \_\_\_\_\_ Cafeteria \_\_\_\_\_ Auditorium \_\_\_\_\_ Other: \_\_\_\_\_

3. Dates – Time and Hours of Use:  

<u>Dates</u>	<u>Time</u>	<u>Number of Hours</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Purpose: \_\_\_\_\_

5. Will there be an admission charge? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, what will net proceeds be used for? \_\_\_\_\_

6. Check services/equipment needed. (Note: Charges may be required)

Sound System _____	Stage Lighting _____	Cafeteria _____
Scoreboard _____	Folding Stands _____	Tables _____
Concession _____	Projector _____	
Other _____		

Required services are:

Cafeteria _____	Stage Lighting _____
Custodian _____	Audio Visual Equipment _____

The school custodian on duty will be in charge of the building. Responsible person will be responsible to custodian for the following:

1. The conduct of persons taking part in the activity.
2. Any damage to property.
3. Adherence to time schedule.
4. Containing activity to engaged portion of building.
5. Assigning doorman to assure authorized admittance only.
6. Enforcing no smoking, drinking and drug regulation.

Will police be in attendance? Yes \_\_\_\_\_ No \_\_\_\_\_

Will stage crew be needed? Yes \_\_\_\_\_ No \_\_\_\_\_

Start time of Event (if applicable provide date and start time) Date: \_\_\_\_\_ Time: \_\_\_\_\_

Starting time for custodian \_\_\_\_\_ Estimated time for Custodian \_\_\_\_\_

Remarks or special arrangements \_\_\_\_\_  
 \_\_\_\_\_

I/We have read the above and understand. I/We are responsible for conforming to above use regulations, damages and fees as result of use of property and guarantee to pay for same.

\_\_\_\_\_ Responsible Person \_\_\_\_\_ Date \_\_\_\_\_

**Not less than fourteen (14) days prior to facility use.**

Application: Approved \_\_\_\_\_ Date \_\_\_\_\_  
 Signed by Principal/Designee \_\_\_\_\_

Application: Denied \_\_\_\_\_ Date \_\_\_\_\_  
 Signed by Principal/Designee \_\_\_\_\_

**Seven (7) days prior to use.**

Insurance Certificate Received: \_\_\_\_\_ Date \_\_\_\_\_  
 Security Deposit Received: \_\_\_\_\_ Amount: \_\_\_\_\_ Date \_\_\_\_\_

Copies to: Sponsoring Group \_\_\_\_\_ Stage Manager \_\_\_\_\_ Custodian \_\_\_\_\_  
 Gym Manager \_\_\_\_\_ Cafeteria \_\_\_\_\_ Building \_\_\_\_\_  
 Secretary \_\_\_\_\_

**FINAL CHARGES TO BE DETERMINED AFTER FACILITY USE**

(All checks made payable to LASD)

Building charges: Number of Hours \_\_\_\_\_ @ \$ \_\_\_\_\_ /hr. TOTAL \_\_\_\_\_  
 Custodial charges: Hours worked \_\_\_\_\_ @ \$ \_\_\_\_\_ /hr. TOTAL \_\_\_\_\_  
 (Note: prorated salary) Custodian Signature \_\_\_\_\_  
 Other charges: \_\_\_\_\_ TOTAL \_\_\_\_\_  
**GRAND TOTAL** \_\_\_\_\_

**COMPLETED BY DISTRICT BUSINESS OFFICE**

Charges approved and check received by Principal: \_\_\_\_\_ Date \_\_\_\_\_  
 Check received by Business Manager: Check No. \_\_\_\_\_ Date \_\_\_\_\_  
 Security Deposit returned: Initialed \_\_\_\_\_ Date \_\_\_\_\_