

Blacklick Valley Jr. Sr. High School
Request for Use of Facility

Date of Request: _____

Date(s) the Facility is Needed: _____

Starting Time and Ending Time of Event: _____

Specific Doors to be Opened: _____ Times to Open Doors: _____

Handicapped Entrance Needed? _____ Yes _____ No

Group Name/Responsible for Use of Building and Clean Up: _____

Purpose: _____

Contact Person, Phone Number, **& Address for Billing:** _____

What is needed? What areas of the facility are requested for use?

Custodians needed? _____ Security needed? _____

Please Note:

- Clean up will be the responsibility of those requesting to use the building. Vacuum, broom, rags and mops will be made available upon request. A \$50 charge will be required for those who do not clean the area after use.
- When an event is held during a time when the custodial staff is not on duty, **payroll reimbursement will be billed to the organization holding the event.**
- If custodial services are not needed, a BVSD staff member must assume responsibility for opening and closing the facility, gaining access to approved areas, checking the building for cleanliness and damage.
Name of BV STAFF _____
- Providing security and proper supervision is the responsibility of the group or person requesting use of the facility.
- Permission will not be granted for use of cafeteria ovens, freezers, or utilities.
- NO FOOD or DRINK permitted in the auditorium; water only in the gym.
- NO ALCOHOL or TOBACCO Products permitted on school property.
- **Attach COPY OF LIABILITY INSURANCE with Blacklick Valley School District added as an additional insured – for outside groups**

Request Granted _____ Denied _____

Signature of Building Principal _____

Signature of Facilities Supervisor _____

Signature of Superintendent _____

Signature of Business Manager _____

*****By being granted use of this facility you are responsible for damages that may occur during use.***