REMSEN CENTRAL SCHOOL DISTRICT
SCHOOL DISTRICT FACILITIES REQUEST

[Please file at least four (4) weeks in advance]

Name of Organization: _____

Reason for Use of Buildings/Grounds: _____

Building Requested (Circle One): ◯ Elementary ◯ High School

☐ Gym ☐ Media Center ☐ Hallway ☐ Auditorium ☐ Stage ☐ Athletic Field ☐ Cafeteria

Date of Use: _____ from _____AM/PM to _____ AM/PM
(set up time) (clean up time)

Check Days: ☐ Mon. ☐ Tue. ☐ Wed. ☐ Thurs. ☐ Fri. ☐ Sat. ☐ Sun.

Practice date(s) _____ and times _____ to _____
Practice date(s) _____ and times _____ to _____
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Equipment Requested: ☐ PA System ☐ Tables ☐ Folding door open ☐ Chairs
☐ Piano ☐ Spotlights ☐ Bleachers ☐ A/V Equipment ☐ Podium

Admission charged: ◯ Yes ◯ No
Proceeds will be used for the following purpose:

_____

Do you have your own insurance?

◯ Yes ◯ No

It is understood that the organization named above shall assume the responsibilities as outlined in the "Community Use of School Facilities" District Policy which can be found at:
https://web2.moboces.org/policies/remsen/1001%20Community%20Use%20of%20School%20Facilities%2Epdf

_____ _____ _____
Print Name of Person Requesting Facility Sign Name Date

_____ _____ _____
Email address Address Phone Number

_____ _____
*Signature of Trained AED Member to be present Date

*AS REQUIRED BY NEW YORK STATE LAW EFFECTIVE DECEMBER 1, 2002

_____ _____
Building Principal Date

_____ _____
District Office Date

Updated 10/28/2026 AR