## PIONEER UNION SCHOOL DISTRICT

USE OF FACILITIES APPLICATION AND PERMIT

Applicant Organiz	ation		Date	
Address		Requested By		
FACILITIES REQUES	STED			
School		Room(s) and/or area		
Number of Chairs	Number of Tables	Other		
	charge or collection be made? _ sed for:			
Expected attendan	ce: Adults Minors _	Total		
Purpose of event/r	meeting(s)			
Dates Required:	Hours:	Dates Required:	Hours:	
	From: to		From: to	
	From: to		From: to	
	From: to		From:to	
I am an officer or du following provisions:	ly authorized agent of the above or	rganization. I will accept respo	nsibility for and agree to the	
school district 2. The Use of Fa along with ap 3. To see that th	ge to building or facilities occurring t is reimbursed for damage. cilities, Indemnity, and Insurance A oplicable insurance certificate nami ne attached rules are adhered to. Co owing of these rules and provisions,	Agreement has been signed an ing Pioneer USD as additional ontinued permission to use the	d attached to this application, insured. e school facilities is contingent	
Signature of Responsible Person		Relation to Organ	Relation to Organization	
Address		Telephone Numbe	Telephone Number of Responsible Person	
(FOR SCHOOL USE	**************************************	Insurance From A	**************************************	
Room or Area Assig	gned:	Equipment Assign	ned:	