

Lyme Central School District Activity / Facility Use Request Form

Submitted by: Lea Wilson Date of Request: June 2 2019
 Class/Group Name Boys + Girls Varsity Basketball Date(s) of Activity: Dec 6, 7, 8 2019
 Activity: Coach vs Cancer Basketball Tournament / Celius Falls
This would be paid for by Fundraising
 Start Time: TBD End Time: TBD
 Purpose: To play in a tournament in Celius Falls
 Facilities needed: *(cafeteria, gym, outdoor court, stage, etc.) None

*Dates/approval may be subject to change depending on availability of facility area requested: _____

Bldg. Maint. Dept _____ Date _____

Equipment needed: (LCD projector, laptop, microphone, etc) We will need a Bus and Bus Driver

Outside agency contact information

Name: _____

Name of Organization: _____

Name of Insurance: _____

Address: _____

Phone #: _____



Email: _____

Name of the person who has training in the use of a defibrillator _____

Name of the person who has first aid training _____

- Attach a schedule if using facility more than once for same request
- Submit all requests that require BOE approval 2 weeks prior to next scheduled BOE meeting
- Non-school organizations need to attach a Certificate of Insurance

For Fundraisers Only: _____

Comptroller's Signature	Date
<u></u>	<u>6/6/19</u>
Principal	Date
<u></u>	<u>6/6/19</u>
Superintendent	Date

(Superintendent's signature required for events held by Outside Agency only)

For office use only

- | | | |
|---|--|--|
| <input type="checkbox"/> Add LCS Planning Calendar | <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Custodial |
| <input type="checkbox"/> Add to website | <input type="checkbox"/> Phys. Ed. Staff | <input type="checkbox"/> Groundskeeper |
| <input checked="" type="checkbox"/> BOE - add to agenda <u>6/13/19</u>
appr. <u>7/1/19</u> | <input type="checkbox"/> Main Office | <input type="checkbox"/> Extracurricular Comptroller |