



**SUPERINTENDENT**  
Robert A. Hlasko

# Cory-Rawson Local Schools

**BOARD OF EDUCATION**  
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Rawson, Ohio 45881

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## REQUEST FOR USE OF SCHOOL FACILITIES

**TO:** Superintendent's Office      **FROM:** \_\_\_\_\_  
Name of Organization/Group/Club

We seek permission to use the following school facilities within in the \_\_\_\_\_  
School Building

Room(s): **Library** -  Old High School    Old Middle School    New Library/Media Center

**Gymnasium** -  High School    Abbey    Elementary      **Cafeteria** -  Old    New

Auditorium       Community Room       Classroom(s): How Many: \_\_\_\_\_ *continue below.*

Location/Room No/s.: \_\_\_\_\_

If for a season or extended period, state the beginning and ending dates:

Day	Date	From	Hours	To
_____	_____	_____	_____	_____

Purpose: \_\_\_\_\_  
\_\_\_\_\_

Name of Adult in Charge: \_\_\_\_\_

We wish entrance to the building at: \_\_\_\_\_ We will vacate the building by: \_\_\_\_\_

We  will,  will not, charge an admission fee. We expect approximately \_\_\_\_\_ persons to attend.  
check one

We require use of the following, and understand there is a charge for such use:

- Stage
- Special Lighting
- Piano (on stage) (on auditorium floor)  
circle one
- Projector
- Speaker's Podium
- Ticket Table & Chairs (no. \_\_\_\_\_)
- Gymnasium Locker Rooms
- Folding Chairs (no. \_\_\_\_\_)
- Large Folding Tables (no. \_\_\_\_\_)

Additional requests or comments: \_\_\_\_\_  
\_\_\_\_\_

Additional Equipment: (i.e., PA system, microphone, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

It is understood that School District activities have preference over outside activities in using the school buildings and this request is subject to cancellation if the requested facility is needed for a school activity.

If this permission is granted, we agree to be responsible for any accidents or injuries sustained by any person attending or participating in the program or activity for which we may use the above-mentioned school facilities, and to be responsible for replacement in case of any damage or loss incurred. Further, in accordance with State requirements and Board policy, we agree that there shall be no use of tobacco or controlled substances on school grounds.

\_\_\_\_\_  
Name of Organization/person/group

By: \_\_\_\_\_  
Signature

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**THIS SPACE FOR DISTRICT USE**

This request has been approved and granted.

RENTAL \$ \_\_\_\_\_ OTHER FEES \$ \_\_\_\_\_

All rental and other fees will be invoiced after the event and checks are to be made payable to Cory-Rawson Schools.

This approval is subject to the provisions of Board Policy #7510A and certain other conditions as set forth below:

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date

This request cannot be granted for the following reason(s):

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date