Valley View Community Unit School District 365-U
APPLICATION FOR USE OF FACILITIES
Elementary and Middle Schools

Request to Use _____
(Name of School)

Date Needed _____ Times _____

Nature of Activities _____

Organization Requesting Use _____

Person in charge (Please Print) _____

Street Address (Please Print) _____

City & State (Please Print) _____

Phone _____

The organization assumes full responsibility for any damage to, or loss of school property arising from or in any way connected with the subject activity and agrees to repair or replace such property promptly without expense to the school district.

☐ School Day Request ☐ Non School Day Request

X _____
Signature of Applicant Date

ELEMENTARY SCHOOLS *(Please check area to be used)*

R.C.Hill		J.R. TIBBOTT		VALLEY VIEW		OAK VIEW		WOOD VIEW	
Classroom		Classroom		Classroom		Classroom		Classroom	
Gym		Gym		Gym/Cafe		Gym		Gym	
Cafe		Cafe'/Multi Purp. Room				Cafe'/Gym		Cafe	
Library		Library		Library		Library		Library	
Kitchen		Kitchen		Kitchen		Kitchen		Kitchen	

INDEPENDENCE		JONAS SALK		JAMIE MCGEE		PIONEER		K.L. HERMANSEN	
Classroom		Classroom		Classroom		Classroom		Classroom	
Gym		Gym		Gym		Gym		Gym	
Cafe'/Gym		Cafe'/Gym		Cafe'/Gym		Cafe'		Cafe'	
Library		Library		Library		Library		Library	
Kitchen		Kitchen		Kitchen		Kitchen		Kitchen	

B.J. WARD		IRENE KING		BEVERLY SKOFF	
Classroom		Classroom		Classroom	
Gym		Gym		Gym	
Cafe'		Cafe'/Multi Purp. Room		Cafe'	
Library		Library		Library	
Kitchen		Kitchen		Kitchen	

MIDDLE SCHOOLS *(Please check area to be used)*

A. VITO MARTINEZ		JANE ADDAMS		HUBERT H. HUMPHREY		BROOKS		JOHN LUKANCIC	
Classroom		Classroom		Classroom		Classroom		Classroom	
Gym		Gym		Gym		Gym (big)		Gym	
Cafe'		Cafe'/Multi Purp. Room		Cafe'/Multi Purp. Room		Commons/Cafe'		Commons/Cafe'	
Little Theater								Auditorium	
Library		Library		Library		Library		Library	
Kitchen		Kitchen		Kitchen		Kitchen		Kitchen	
						Auditorium			
						Gym (small)			

LIABILITY INSURANCE

User must provide $1,000,000 limit of liability insurance for bodily injury and property damage. User must provide certificate of insurance showing the Valley View Community Unit School District 365U as additional insured.

Approved By: _____
Building Administrator Date

FOR OFFICE USE ONLY
Energy request on _____ (date) **by** _____ (name) .

629/04