

OXFORD PUBLIC SCHOOLS

APPLICATION FOR USE OF HIGH SCHOOL BUILDING OR ATHLETIC FIELD

Applications for Athletic Fields will be accepted no later than the following:

Spring: February 1st Summer: May 1st Fall: August 1st Winter: November 1st

Submit this completed and signed application form to the High School Secretary/Main Office. Once the application is reviewed and approved by the Athletic Director and/or Building Principal, it will be sent to the Central Administration Office. The School Business Administrator will then determine the amount of fees due and contact the organization's Responsible Representative via email or telephone. Pre-payment of ALL fees is required.

Today's Date: _____ Group/Organization: _____

Group/Organization Mailing Address: _____

Group/Organization's Responsible Representative: _____

Telephone: _____ Email: _____

Reason Requested: Youth League Adult League Sports/Camp Clinic Tournament Dance
Town Event School Function Other Please explain: _____

Area Requested: Football Field/Track Field Hockey Field Baseball Field Softball Field Soccer Field
Gymnasium Auditorium Classroom Community Room Other Activity

Please Describe Event: _____

Date Requested: _____ Anticipated Attendance: _____

Time Requested: FROM: _____ AM PM TO: _____ AM PM

Time of Event: FROM: _____ AM PM TO: _____ AM PM

Additional Needs/Set-up Requested (tables, chairs, video access, etc.): _____

The undersigned understands and agrees to comply with all Rules and Regulations as they pertain to school department building and athletic facilities, and also agrees to communicate with the Athletic Director, Building Principal, and/or Custodian in order to discuss all details of the event or activity.

Signature of Responsible Representative

Date

****FOR INTERNAL USE ONLY****

Athletic Director or Building Principal has been contacted and reviewed all details regarding this request with the Responsible Person as well as with the Custodian who may be on duty for the event. After building/field approval is indicated, send this form to the Central Office.

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| APPROVED _____ DECLINED _____ Added Staffing Required: Custodial # _____ Athletic Director/Principal Signature _____ Date _____ | Rental Fee: \$ _____ Personnel Fee: \$ _____ Business Administrator Signature _____ Date _____ |
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| Rental Fees Waived: _____ Date: _____ Personnel Fees Waived: _____ Superintendent Signature (required if fees are waived) _____ |
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