

Friday - Jan 11<sup>th</sup>, Jan 18<sup>th</sup>, Feb 8<sup>th</sup>  
Thursday - ~~Jan 11<sup>th</sup>~~, Jan 31<sup>st</sup> Tuesday, Feb 26<sup>th</sup>  
**NATRONA COUNTY HIGH SCHOOL**  
**BUILDING USE REQUEST FORM**

Outside Groups: Please check in at the office upon your arrival (during school hours)

Date of Request: 1/5/18 Date(s) of Building Use: Jan 11, Jan 18, ~~Jan 24~~, Jan 31,  
 Time(s) of Building Use: 6:00-7:00pm Time(s) of Activity: Feb 8, Feb 26

Group or Organization Using Building: Indoor Track

Reason for Building Use: Team Dinner  
 Meeting(s) \_\_\_ Banquet \_\_\_ Dance \_\_\_ Practice(s) \_\_\_ Game(s) \_\_\_ Music Production \_\_\_  
 Theatre Production \_\_\_ Fundraising Activity \_\_\_ Voting Poll \_\_\_ Registration \_\_\_  
 Rehearsal(s) \_\_\_ Reunion \_\_\_ Training/Prof. Dev \_\_\_  
 Other \_\_\_\_\_

Requested Area(s): Commons  
 Cafeteria (East) \_\_\_ (West) \_\_\_ Auditorium \_\_\_ Band Room \_\_\_ Library \_\_\_ Staff Center \_\_\_  
 Main Gym \_\_\_ Auxiliary Gym \_\_\_ Wrestling Room \_\_\_ Weight Room \_\_\_ Fitness Center \_\_\_  
 Locker Room(s) \_\_\_ Gym Lobby \_\_\_ Pool \_\_\_ Stadium \_\_\_ Track \_\_\_ Classroom(s) / /  
 Other \_\_\_\_\_

Does Facility need to be opened?  Yes  No Time \_\_\_\_\_ AM-PM

Does Facility need to be locked after use?  Yes  No Time \_\_\_\_\_ AM-PM

Is this function open to the Public? Yes   No

Will Admission be charged? Yes   No Amount \$ \_\_\_\_\_

How many people will be in attendance? Less than 50 \_\_\_ Less than 100  More than 100 \_\_\_

Will food or beverages be: (Sold) \_\_\_ (Provided) \_\_\_ at this activity? Yes  No \_\_\_

General Equipment needed:  
 Microphone(s) # \_\_\_ Podium \_\_\_ Tables # \_\_\_ Chairs # \_\_\_ DVD Player \_\_\_ TV \_\_\_ Projector \_\_\_  
 Screen \_\_\_ Projector \_\_\_

Is special lighting and sound necessary for this function? Yes \_\_\_ No \_\_\_ Cafeteria tables for seating

List person(s) who will be in charge of this activity: \_\_\_\_\_  
4 long tables for food service

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Approval \_\_\_\_\_ Date \_\_\_\_\_ Denial \_\_\_\_\_ Date \_\_\_\_\_  
Terr Yeardon