

**REAVIS HIGH SCHOOL**  
**REQUEST FOR USE OF FACILITIES**

DATE \_\_\_\_\_

**Please verify facility availability before submitting form to maintenance secretary. Return form no later than (1) week prior to scheduled event.**

ORGANIZATION:			
ACTIVITY:			
FACILITIES REQUESTED:			
<b>DATE OF EVENT:</b>		<b>DAY OF EVENT:</b>	
NO. OF PARTICIPANTS	START TIME: a.m. p.m.	FINISH TIME: a.m. p.m.	SET-UP: DATE: DAY: TIME:
PERSON TO CONTACT: Name: Address: Phone:		PERSON TO CONTACT: Name: Address: Phone:	
<p><b>SERVICES &amp; EQUIPMENT NEEDED:</b> Requesting staff member <u>must</u> arrange with the A.V. office for Audio-Visual equipment. Library usage is to be arranged with library staff. Use reverse side for diagrams/set up design.</p>			

ADMINISTRATIVE APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

ROUTING:                      HORAN                      DONOHOE                      GUTIERREZ                      APPLEBY                      AV                      MORALES