

Facilities Use Application

District Operations Office
150 Alta Dale SE, Ada, MI 49301
Phone: 616-493-8780 Email: bhurbanis@fhps.net

Please Note: This form must be submitted to the principal of the building/site at least **TWO** weeks prior to the date of use.

Internal Use Only. Date Received: _____

- Internal**
FHPS group/activity. No rental fees for use.
- External**
Non-school, non-profit group/activity. Rental fees charged for use.

Internal Use Only.

Date(s)/Time(s) Facility Not Available: _____

Name or Type of Event: _____ Date(s) of Event: _____

Site/Building Requested: _____ Day(s) of Week for Event: _____

Area(s) Requested within Site/Building: _____ Number of Participants: _____

Applicant's/Organization's Name: _____

Contact's Name: _____ Phone: _____

Mailing Address: _____

(No post office box addresses accepted. Include suite number.)

City

State

Zip

Event Time Details:

1.) Arrival Time: _____ AM PM Departure Time: _____ AM PM Event Time: _____ AM PM to _____ AM PM

2.) Arrival Time: _____ AM PM Departure Time: _____ AM PM Event Time: _____ AM PM to _____ AM PM

Equipment Needed:

- Chairs: _____ (qty.) Laptop, Digital Projector, Reflective Screen Reflective Screen Only
- Table(s): _____ (qty.) DVD/VCR with Monitor Portable Stage
- Podium(s): _____ (qty.) Overhead Projector, Reflective Screen Other: _____

Processing/Application Fee: \$10.00 Payable at Time of Application.



Print Name of Responsible Adult in Charge of the Event

- User is required to provide proof of liability insurance coverage by supplying Forest Hills Public Schools with a valid certificate of insurance. The certificate is due **TWO** weeks prior to use date.
- All external groups are required to pay a 100% deposit **TWO** weeks prior to use date. Groups will be contacted with an estimate of the charges.
- A final invoice will be sent to external groups within 30 days after the event.

I, as the sponsoring adult, agree to be responsible for rental and fees on behalf of the organization named above. In addition, I and my group shall assume all liabilities for damage which may occur in, on, or about any FOREST HILLS SCHOOL DISTRICT facilities as a result of using those facilities.

Signature: _____

Phone: _____

Email: _____

Date Signed: _____

Room Set-up Diagram: ○ = chair □ = table ⊗ = podium ≡ = screen

Application approved for Forest Hills Public Schools by:
(ONLY original signatures accepted)

Building Administrator

Athletic Director (if applicable)

Head Custodian (if applicable)

District Scheduling Coordinator