(Revised 9/2023)

ext. 1201 and leave a message.

ORANGE PUBLIC SCHOOLS REQUEST FOR USE OF SCHOOL FACILITES

The (name of organization)		requ	ests permission to use (Orange Public
School facilities, as noted below, under the	•	•	•	
The Board's Policy and Regulations a		-		•
The organization's status is:				
Contact Person:				
Address:	Phone:		Cell Phone:	
Billing Address:				
School Location:	for the purpo	ose of		-
Date(s)		Time of Event:	a.m. / p.m. to	a.m./p.m.
Rain Date (if needed)		Time of Event:	a.m./p.m. to	a.m./p.m.
It is anticipated that approximately	adults and		children will attend.	
Admission Charge \$ Will fee	es, contributions, donati	ions or other money	be collected? YES	_ NO
Refreshments: YES NO If yes, p	rovide brief description			
Will set-up be required? YES NO	Is a dedicated	custodian requeste	d for this event? Yes _	No
IF YES, CUSTODIAN ON DUTY: _	a.m./p	o.m. to	_ a.m./p.m.	
Set Up Requirements:				
	Orga	anization is responsib	ole for following recycli	ng protocol.
►If a special set-up or request is needed	: please check	and draw a diagram or	specify instructions on rev	erse side
Please check off below the requirements f	for the event or activity:			
Custodian	Stage	Computer		
TO 1 C 4 CC	Gymnasium Music Room	D 1' /D'	n(s) #of classrooms re Dept. (if applicable)	
	Music Room Library		ecify)	
In making this application, we hereby agree to do to be responsible for any damage to or loss of approvals need to be in place prior to event. Certificate of Liability Insurance is require Certificate Holder. The Certificate Holder operations of the named insured during the p	school property arising from All charges and fees must d. As the insured organ must be added as an A	m our occupancy of any be paid as described in aization, your certification	y portion of the buildings on the Board's Policy and F ate must name the Orang	r grounds. All Regulations. A ge BOE as the
DateSignature	Authorized Agent of Orga	Ti	ile	
	Authorized Agent of Orga	nization		
DateSignature	Principal			
	•			
DateSignature	Director of Busi	ness & Operations		
OFFICE USE ONLY (DO NOT WRITE BEL				
Room Rental Fee: Yes No Custodial Cha		ty Charge: Yes II No II	Food Service Staff Char	ge: Ves II No II
				50. 100 H 110 H
Approved by Facilities Coordinator:			e:	
CC: School Secretary School Custod Note: Building use reservations are accepted frequest via fax (203) 891-8025 or email dwilliam	om September through Jun	ie. Please allow one full	week for processing. Subn	iit your

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