## Canyon High School In-House Use of Facility Request

- Please allow 15 days for processing.
- · Please complete this form in black ink and print legibly.
- Once this form is completed, please submit it to the AP Secretary for Curriculum and Instruction.
- Please complete this form if you are requesting to use CHS facilities between 7 a.m. and 3:30 p.m.
- This form must be completed by the club advisor, coach, or teacher if the request is made on behalf of a student group.

Applicant:			Today's Date:			
Contact Information:	Phone Nu	ımber	= =	Email Ad	dress	
Name of Teacher/Club /			Signature:			
			Time of Activity: From: To:			
Facility Requested:			Estimated Attendance:			
use their facilities – th	eir need will take	priority over a	any schedi nd and acc	e that if the Athletics Departme uled group/event. If this occurs ept this exception, please sign.	, we will attempt to contact you	
If you are planning to	use					
Any Athletics facility such as the Main or Small Gym, Pool, Field (Track, Baseball, or Football)			Please see Sandra Barraza in the Athletics Office. She will need to authorize use by signing this form before you can submit it to the AP Secretary.			
Cafeteria, Quad, front of the Main Gym, or a Classroom			Please see Mrs. Sahli in the Counseling Office.			
The Library			Please see Mrs. Fisher in the Library. She will need to authorize use by signing form before you can submit it to the AP Secretary.			
Custodians to open the	building at:			To close the building at:		
clean-up of school equip.m. and will be assess *The organiza	ipment and furnitu sed on the weekend ition sponsoring th	re. Hourly cus ds. le activity is re	stodial char sponsible t	rangement and the custodial staf ges may be assessed for service for clean up immediately followin onsible for set up and clean up f	es during the week at or after 10	
Approved	Denied		Administrator		Date	
					7-11	
Approved	Denied	At	thletic Directo	r / Librarian / AP Secretary	Date	
Approved	Denied.	Department Re	epresentative	/ Teacher - Please indicate your title.	Date	
Athletics Request received by:		Date	:	Main Office received by:	Date:	
Calendared:		AC	wo:	Date to Silvia	no:	
Silviano:						