



**LAWRENCE HIGH SCHOOL CAMPUS
APPLICATION TO USE BUILDING/FACILITY**

Name of Person or Organization Current Date

Purpose of Request: _____

Number of people expected/attendance: _____ Date of Use _____ Time of Use from _____ to _____

ex: 8:00am

Please check CAMPUS AREA needed:

LECTURE HALL	UPPER CAFÉ	Library Conf. Rm.	MAIN CAFÉ	B149
CLASSROOM: ROOM(S) _____	GYM	Library Space	PAC	Library Computer Lab
OTHER: _____				_____ # of Computers Needed

Will any equipment be brought in? Specify, what and why? _____

School equipment needed _____

Name of person running this event Position

Email Phone

The signing of this application shall constitute an agreement to abide by all rules and regulations governing the facilities use of Lawrence High School and to accept full responsibility for damages to, or loss of school property.

Name of person running this event Signature Date

Approved by: PRINCIPAL Signature Date

Facility Administrator Signature Date

OFFICE USE ONLY

APPROVED COPIES SENT TO:

APPLICANT	PRINCIPAL	SAFETY
CUSTODIAN	FOOD SERVICES	MATT EVANGELISTA
LPS MEDIA - DAVE PEKARSKI	IS&T ED & JOSE	ELIZABETH SMITH
_____	_____	_____

Notes: _____

Emailed Approved Date _____

For Library (see Elizabeth Smith) ** For Athletics/Gym (see Mr. Licciardi) *** For Lecture Hall (see Kathy Thomas)**** Bake Sales (see Mr. Watts)

***** COMPLETED APPLICATIONS ARE TO BE SENT TO MR. TIMOTHY FINN AT Timothy.Finn@lawrence.k12.ma.us TO PROCESS.

**** ALTERED DOCUMENT WILL NOT BE ACCEPTED**