

Pattonville School District

Building Use Application PSD-M/3
(Except Auditorium)

Dates Effective Included					
	Jan.	Feb	Mar	Year	
S	Jan.	Feb	Mar		
M	Apr.	May	Jun.		
T	Jul.	Aug.	Sep.		
W	Oct.	Nov	Dec		
TH	1	2	3	4	5
F	6	7	8	9	10
S	11	12	13	14	15
	16	17	18	19	20
	21	22	23	24	25
	26	27	28	29	30
	31				

Applicant _____ Date _____ Time _____

Purpose of Organization _____ Attendance _____

Fund Raising* Y or N Banquet* Y or N District Resident Y or N

Profit ___ Non-Profit ___ Copy of Non-Profit 503C letter provided Y or N

Other _____ Admission Charge* _____

**Fee based activities may be subject to the lesser of \$100 or 10% of total charges*

Name of School _____

The undersigned hereby makes application to Pattonville school premises and has read and understands the Facility Usage policy and procedures. In addition, agrees to observe all regulations as set forth by the Board Education and Missouri School Law.

Signature

Street _____ City _____ Zip _____ Telephone _____

Title

<u>Building Elements</u>	<u>Minimum 2 hours</u>	<u>Additional hours</u>
[] All Classrooms	10.00	5.00
[] All Kitchens**	50.00	25.00
[] All Dining Rooms	60.00	30.00
[] Elementary Activity Rooms	60.00	30.00
[] Elementary Gyms	60.00	30.00
[] High School Gym	115.00	57.50
[] High School Activity Room	90.00	45.00
[] Pattonville Heights Gym	115.00	57.50
[] Holman Gym A	115.00	57.50
[] Holman Gym B-1	90.00	45.00
[] Holman Gym B-2	90.00	45.00
[] Holman Gyms B1 & B2 Combination	140.00	70.00
[] Dressing Rooms (Boys or Girls)	35.00	17.50
[] Low Ceiling Room	60.00	30.00
[] Multipurpose Room	60.00	30.00

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- **Additional Equipment**
- [] Public Address 25.00
- [] Projection Equipment 25.00
- [] Speakers Table 10.00
- [] Special Seating _____
- (Custodial Fees)
- [] Athletic Fields/Outdoor Facilities
- 25.00 per each 2 1/2 hours _____
- Field _____

Custodian(s) Assigned _____ 22.00 per hour _____
Name(s) Fees

** Food Preparation Yes [] No [] Catered [] Cost Per Meal _____

Food Service Employee(s) Assigned _____ 25.00 per hour _____
Name(s) Fees

Cost Summary

Building Elements _____
Food Service _____
Custodial _____
Fee Based _____
Total Cost _____

Approved by Food Service Director

_____ *lesser of \$100 or 10% charged by the requestor to attendees*

APPROVED _____
Building Principal

FINAL APPROVAL _____
Director of Facilities

*** No kitchen equipment shall be used without the presence of kitchen personnel. Contact the Food Service Director at 213-8054 or local Kitchen Manager if you have any questions.*