SOUTHERN BERKSHIRE REGIONAL SCHOOL DISTRICT APPLICATION FOR USE OF SCHOOL EQUIPMENT

DIRECTIONS TO APPLICANT: Complete and submit to the Superintendent of School's designee. The Business Manager's signature on the original constitutes a contract for the applicant's use of facilities, grounds or equipment as specified below.

Name of the Group:			
Applicant's Name:	Applicant's Email:		
Applicant's Address:			
Billing Address if different from above	e:		
Phone #: Home:	Work:	Cell:	
Equipment Needed:			
Type of Activity: Practice: Per	formance: Other:		
Date(s) Requested:	Day(s) of Week:		
Pick Up Date:	Return Date:		
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	SECTION TO BE COMPLETED I		
Individual: Civic:	Non Civic: Rental Fee:	Certificate of Insurance Required:	
Custodial Fee: Cafeteria:	Technician(s): Food W	orker:	
Approved:Business Admir	 nistrator		