

**CAMPBELL UNION HIGH SCHOOL DISTRICT**  
**3235 Union Avenue, San Jose, California 95124-2096**  
**Telephone: (408) 371-0960**

No. \_\_\_\_\_

**APPLICATION FOR USE OF SCHOOL PROPERTY**  
 (Application must be made thirty days prior to date of event)

*Any person applying for the use of school property on behalf of any society, group or organization shall be a member of such applicant group and unless he is an officer of such group, must present written authorization from such applicant group to make such application.*

Request for use of \_\_\_\_\_ at \_\_\_\_\_  
 (School)

Purpose \_\_\_\_\_ Name of organization \_\_\_\_\_

Date of use \_\_\_\_\_ Hours from \_\_\_\_\_ to \_\_\_\_\_  
 (List all dates)

Admission charge or contributions solicited (Yes \_\_\_\_\_ No \_\_\_\_\_). If the answer is yes, what are these monies to be used for? \_\_\_\_\_

Number of people expected \_\_\_\_\_ Cafeteria kitchen facilities needed \_\_\_\_\_

Special equipment needed \_\_\_\_\_

*The above mentioned hours will be strictly observed, and should it be necessary to extend the time beyond that specified in this application, special permission must be obtained from the school Principal or an understanding had with the custodian before the meeting convenes and in such instances additional charges will be made.*

*Applicant hereby agrees to hold the Campbell Union High School District, its Governing Board, the individual members thereof, and all District Officers, agents, and employees free and harmless from any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of school property. The applicant agrees to furnish such liability or other insurance for the protection of the public and the lessor as the lessor may require. The applicant agrees to reimburse the school district for any damage to school property occasioned by or growing out of the use herein requested.*

*The undersigned states that all statements made in this application are true and correct to the best of his knowledge.*

Name of person requesting reservation \_\_\_\_\_  
 (please print)

Address \_\_\_\_\_ Tel. no. Home \_\_\_\_\_

City \_\_\_\_\_ Work \_\_\_\_\_

Zip \_\_\_\_\_

When applicable please indicate supervisor or custodian to be assigned	
Custodian _____	No. of hrs needed _____
Supervisor _____	

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_  
 \_\_\_\_\_ Principal \_\_\_\_\_ Date \_\_\_\_\_

**PERMIT FOR USE OF FACILITY - DISTRICT USE ONLY**

Cafeteria employee required \_\_\_\_\_  
 Yes/No \_\_\_\_\_ Director of Food Services \_\_\_\_\_ Date \_\_\_\_\_

CHARGES FOR USE				
Processing Fee				\$ _____
Facilities	#hrs	rate	=	cost
_____	_____	@ _____	=	\$ _____
_____	_____	@ _____	=	\$ _____
_____	_____	@ _____	=	\$ _____
Custodian	_____	@ _____	=	\$ _____
Supervisor	_____	@ _____	=	\$ _____
Misc charges				\$ _____
<b>TOTAL CHARGES (paid in advance by check or Money order)</b>				\$ _____
Payment received by _____				mo day yr
Deposit (if required) to be held at school site \$ _____				

*Subject to the above agreement, and in accordance with applicable Laws, Rules, and Regulations this request is granted by the Campbell Union High School District.*

APPROVED \_\_\_\_\_  
 (Campbell Union High School District) Date \_\_\_\_\_

**DISTRIBUTION OF COMPLETED APPROVED FORM**

White Recreation Supervisor      Green Business Office  
 Yellow Principal                      Blue Custodian  
 Pink Applicant\*\*

\*\* Completed, approved pink copy MUST be present at site while facility is being used.