

**REQUEST FOR USE OF CAFETERIA FACILITIES**

Name of organization or individual \_\_\_\_\_

Facility requested: Dining Room \_\_\_\_\_ Kitchen \_\_\_\_\_ Both \_\_\_\_\_

School requested: \_\_\_\_\_

Date of use: \_\_\_\_\_

Time of use: \_\_\_\_\_ (**Time must be 3 hours or less, unless prior arrangements are made—See regulation #8**)

Describe below the activity that will be conducted:

Name of cafeteria worker who will be present: \_\_\_\_\_

I, \_\_\_\_\_, have read and understand the policy and rules governing the use of cafeteria facilities and agree to the policy and rules. I am authorized to sign for the group. A minimum payment of **\$200.00** must be made to the principal’s office at the time this request is made.

\_\_\_\_\_  
Signature of Individual or Group Representative Date

\_\_\_\_\_  
Signature of Cafeteria Manager Date

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

\_\_\_\_\_  
Signature of Superintendent Date

**THIS FORM MUST BE COMPLETED AND TURNED IN TO THE SITE PRINCIPAL AT LEAST FIVE WORKING DAYS BEFORE REQUESTED USE DATE**