

CRANDALL INDEPENDENT SCHOOL DISTRICT
FACILITY USE APPLICATION FORM

Completed applications should be forwarded to:

Community Room: Kristin Reznicek, Director of Community Relations

PHONE: 972-427-8020

FAX: 972-427-8174

Other Facilities: Dawn Smith, Secretary to Athletic Director

PHONE: 972-427-8227

FAX: 972-427-8233

Crandall ISD; P.O. Box 128; Crandall, Texas 75114

Name of Facility Requested _____

Area of Facility Requested:

___ Cafeteria

___ High School Spectator Gymnasium

___ Kitchen

___ High School Practice Gymnasium

___ Elementary Gymnasium

___ Middle School Gymnasium

___ Other _____

Special Needs:

___ Microphone/Podium

Other _____

___ Light/Sound Operator _____

Function/ Purpose: _____

Activity Date(s): _____ Alternative Date(s): _____

Day(s) of Week (for multiple requests): _____

Beginning Date (for multiple requests): _____

Start Time: _____ End Time: _____

Estimated Attendance: _____ Concession/Admission Involved? __no__yes

(Attach separate sheet or provide additional information on back if necessary.)

Organization Name: _____

Street Address: _____

Phone: _____ FAX: _____

Note: A copy of a document verifying non-profit status issued by the Internal Revenue Service, Comptroller of Public Accounts, or Secretary of State must be attached.

Contact Person:

Name: _____ E-mail Address: _____

Street Address: _____

Phone: (Work) _____ (Home) _____ (Cell) _____

FAX: _____

Title: _____

I VERIFY THT ALLINFORMATION CONTAINED IN THIS APPLICATION IS CORRECT

SIGNATURE

DATE

Principal: _____ Date: _____ Confirmed / Not Confirmed

Ath. Dir: _____ Date: _____ Confirmed / Not Confirmed

Food Dir: _____ Date: _____ Confirmed / Not Confirmed