

*Amboy Community Unit School District #272*  
**APPLICATION FOR USE OF SCHOOL FACILITIES**  
**BY SCHOOL SPONSORED GROUPS & ACTIVITIES**

**BUILDING REQUESTED:**

Amboy High School

Amboy Junior High School

Central School

Organization Requesting Use: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Sponsor / Supervisor: \_\_\_\_\_

**GENERAL INFORMATION**

A. Nature and purpose of activity: \_\_\_\_\_

B. Estimated Attendance: \_\_\_\_\_ Age group using facility: \_\_\_\_\_

C. Date(s) requested: \_\_\_\_\_

D. Time(s) desired: From \_\_\_\_\_ To \_\_\_\_\_  
(Set-up)

**AREAS OF BUILDING OR FACILITIES REQUESTED**

Gymnasium \_\_\_\_\_ Auditorium \_\_\_\_\_ Kitchen \_\_\_\_\_ Cafeteria \_\_\_\_\_ Classroom \_\_\_\_\_

Other (explain) \_\_\_\_\_

**SPECIAL REQUESTS**

Technology: \_\_\_\_\_

Custodian: \_\_\_\_\_

# of Tables \_\_\_\_\_ # of Chairs \_\_\_\_\_

**AUTOMATED EXTERNAL DEFIBRILLATOR (AED) LOCATIONS:**

CENTRAL SCHOOL: South wall in main hallway by office.

AMBOY JUNIOR HIGH SCHOOL: On wall in main hallway by staircase.

AMBOY HIGH SCHOOL: South wall in main hallway by office.

MOBILE AED UNIT: Located in Nurse's Office on 2<sup>nd</sup> floor.

**PLEASE INITIAL VERIFYING THAT YOU HAVE REVIEWED THE LOCATION OF THE AED's \_\_\_\_\_.**

PUT ON DISTRICT CALENDAR?    \_\_\_ YES    \_\_\_ NO

EVENT \_\_\_\_\_

TIME \_\_\_\_\_

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Superintendent/Designee*

**NOTE: The Organization/Applicant listed above is responsible for the actions of its members and any damage to school property related to the requested building rental.**

**AND**

**Please do a walk-through to make sure the area(s) you used have windows closed, lights off, doors locked, etc.**

**The Board of Education or its Designee(s) reserve the right to withdraw permission to use a building or site facility when it is felt to be in the best interest of the school district.**