

**MASON MIDDLE SCHOOL
BUILDING USE APPLICATION FORM**

Date Submitted: _____ Organization: _____

Contact Person: _____ Person Supervising this Event: _____

Daytime Phone: _____ Evening Phone: _____

Address: _____
(Street) (City) (Zip)

Type of Event: _____ Number of People Attending: _____

Room Requested: Gym _____ Gym Balcony _____ Cafeteria A _____ Cafeteria B (with stage) _____
Rm. 22 _____ Library _____ Classroom(s) _____

Date(s) requested: _____

Times Required: Open Door: _____ a.m. p.m. Event Time: _____ a.m. p.m. Depart Time _____ a.m. p.m.

Other Needs: Chairs (#) _____ Tables (#) _____ Projector _____ Screen _____ Microphone _____
Trash Cans _____

Additional Needs: _____

Use Agreement:

I have read the building use guidelines and agree that the activity will be conducted in accordance with it. I agree to be responsible for all charges incurred as a result of this activity and to assume responsibility for the condition of all facilities and items requested and/or used. In the event of breakage, damage or theft, I agree to reimburse Mason Public Schools in the amount of the damage, repair or replacement cost incurred as a result of this activity. Further, I and the organization or group I represent agree to indemnify (to save and hold harmless) the Mason Public School district, its agents, officers and employees against property or personal loss damage/or liability that may be suffered by the school district, its officers and employees caused by, arising out of, or in any way connected with the use by permit holders of the Mason Public School District facility or the experience of the privilege herein granted.

Signature: _____ Date: _____

Date Approved: _____ Approved By: _____

For Office Use Only

Charges:

Facility Rental: _____ Equipment Rental: _____

Custodial: _____ Damages: _____

Total Due: _____ Paid: _____

*Please read the use agreement, sign the form and return it to:
Mason Middle School, 235 Temple Street, Mason, MI 48854
Fax: 517-676-0287*