



BARBERS HILL INDEPENDENT SCHOOL DISTRICT
Application for Use of School Facilities

Name of Applicant: _____ Date of Application: _____

Address: _____ Telephone No.: _____
(street address) (home)
_____ TX _____
(city) (zip) (work)

Requested Date(s): _____ Requested Hours: _____

Campus or Building: _____

Specific facility or area(s): _____
(Note: Access will be allowed only to those areas of the facility as are requested in the application.)

Description of program or activity to be conducted:
(Note: Please include primary purpose of meeting or activity, key sponsors or participants, expected number of attendees, etc.)

Admission charge (if applicable): _____

By my signature, I affirm that I have been provided with a copy of the *Regulations for Rental of School Facilities* and, do hereby agree to adhere to all provisions as therein specified.

(Signature of applicant)

FOR OFFICE USE ONLY

_____ authorized signature _____ date

- APPLICATION APPROVED
- APPLICATION DENIED
- PROCESSING FEE RECEIVED (/ / \$)
(date) (amount)
- DEPOSIT RECEIVED (/ / \$)
(date) (amount)

Fax to: 281-576-3414