



CROSBY INDEPENDENT SCHOOL DISTRICT
Application for Use of School Facilities

Name of Applicant _____

Date of Application _____
(15 work days in advance of event)

Address _____
(Street address)

(City) Tx _____
(Zip)

Telephone No _____
(Home)

(Cell)

Name of Organization _____

Organization Address _____

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.)

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

Printed Name of Applicant

Applicant Signature

FOR OFFICE USE ONLY

Designated Building Administrator

Administrator Signature

Approve Refuse
Approve Refuse
Approve Refuse
Approve Refuse

Additional Requirements (as checked) for FINAL approval prior to the event:

Proof of Non-Profit Status

Certificate of insurance for general liability coverage

Deposit Amount \$ _____

Building Rental \$ _____

Basic amount due shall be paid at
Crosby ISD Operations Center
14670 FM 2100

Custodial Fee \$ _____

Administrative Fee \$ _____

Misc. Fee \$ _____

TOTAL \$ _____

Additional fees may incur depending on
added custodial time needed and
condition of facilities upon exit.

FINAL APPROVAL

Authorized Crosby ISD Signature

Date

Printed Name

APPLICATION APPROVED

APPLICATION DENIED

Reason for denial:

Special Instructions:

