



Tempe Union High School District FACILITY REQUEST FORM

Site: District Office Tempe H.S. McClintock H.S. Marcos de Niza H.S.
Circle Site for event: Corona del Sol H.S. Mountain Pointe H.S. Desert Vista H.S. Compadre H.S.

GENERAL INFORMATION:

Requesting organization _____ Representative name _____
 Address _____ City _____ State _____ Zip _____
 Work phone _____ Day phone _____ Cell phone _____ E-mail _____
 Describe Event _____
 Type of audience: (circle one) 1. General Audience 2. High School Students 3. Children (approx. age) Expected Attendance _____

EVENT LOCATION AND TIMES:

	Classrooms	Time event starts	Time event ends
Dates of event _____	Room(s) _____	Time _____ / _____	
Rehearsals / Setup times:			
Date Requested _____	Room(s) _____	Time _____ / _____	
Date Requested _____	Room(s) _____	Time _____ / _____	
Date Requested _____	Room(s) _____	Time _____ / _____	
Date Requested _____	Room(s) _____	Time _____ / _____	

Please check the appropriate boxes

CAFETERIA FACILITIES

- | | | |
|--------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Main Dining | <input type="checkbox"/> Faculty Dining | <input type="checkbox"/> Gas Barbeque |
| <input type="checkbox"/> Side Dining | <input type="checkbox"/> Food Service - Contact Rick Griffith at (480) 345-3724 | <input type="checkbox"/> Other _____ |
| | <input type="checkbox"/> Kitchen - Contact Rick Griffith at (480) 345-3724 | |

AUDITORIUM FACILITIES

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Auditorium | <input type="checkbox"/> Choir Room | <input type="checkbox"/> Lecture Hall B | <input type="checkbox"/> Other (list) _____ |
| <input type="checkbox"/> Auditorium Pods A | <input type="checkbox"/> Drama Room | <input type="checkbox"/> Make-up Room | |
| <input type="checkbox"/> Auditorium Pods B | <input type="checkbox"/> Dressing Rooms | <input type="checkbox"/> Orchestra Room | <input type="checkbox"/> Special request _____ |
| <input type="checkbox"/> Band Room | <input type="checkbox"/> Lecture Hall A | <input type="checkbox"/> Technicians # _____ | |
- Auditorium approval _____

ATHLETIC FACILITIES

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Baseball Fields | <input type="checkbox"/> Lecture Hall | <input type="checkbox"/> Stadium with lights | <input type="checkbox"/> Other (list below) _____ |
| <input type="checkbox"/> Concessions | <input type="checkbox"/> Locker Room | <input type="checkbox"/> Tennis Court | |
| <input type="checkbox"/> Dance Room | <input type="checkbox"/> Practice Fields | <input type="checkbox"/> Track | |
| <input type="checkbox"/> Large Gym | <input type="checkbox"/> Softball Fields | <input type="checkbox"/> Weight Room | |
| <input type="checkbox"/> Gym Annex | <input type="checkbox"/> Stadium | <input type="checkbox"/> Wrestling Room | Athletic approval _____ |

EQUIPMENT *Place number needed next to equipment.*

- | | | |
|---------------------|--------------------------|--------------|
| _____ Big Screen TV | _____ TV/VCR | _____ Piano |
| _____ Chairs (#) | _____ Heating/Cooling | _____ Podium |
| _____ Scoreboards | _____ Microphones (#) | _____ Screen |
| _____ Table (#) | _____ Overhead Projector | |

PERSONNEL

- | |
|-----------------|
| _____ Custodial |
| _____ Police |
| _____ Security |

Other comments/special needs _____

Representatives signature _____ Date of request _____ Assistant principal signature _____