

Facility Use Exemption Waiver Application

Name of Organization/Applicant: _____

Contact Person: _____

Phone: _____ Email: _____

Address: _____

Facility Information:

Name of Facility Requested: _____

Space Requested (i.e. Gym, Classroom, Cafeteria): _____

Purpose of Facility Use:

Date(s) Requested: _____ Time(s) Requested: _____

Description of Event/Activity - Briefly describe the event or activity for which you are requesting the facility.

Reason for Exemption - Explain why you are seeking an exemption from any fees or requirements for facility use. Include any relevant policies or regulations that support your request. Also include any fees charged to participants and how those funds are used.

How will this event/activity benefit the community or the facility? Describe the positive impact or benefits this event/activity will bring to the community or the facility.

Acknowledgment and Agreement:

By signing this application, I acknowledge that:

- The information provided is accurate to the best of my knowledge.
- I understand that approval of this waiver is at the discretion of facility management.
- I agree to comply with all applicable policies and regulations during the event/activity.

Signature: _____ Date: _____