



J. Sterling Morton High School District 201

BUSINESS OFFICE

5801 West Cermak Road, Cicero, Illinois 60804

(708) 780-2116

August 13, 2025

TO: Dr. Michael Kuzniewski

FR: Nicholas Valderas

RE: Facility Usage Requests for August 2025

GROUP	FACILITY REQUEST	DATES
Alumni Class of 1975 Wanda Moy	Morton West- Tour of School	10/24/2025
Berwyn Fire Dept Chief Scott Waszak	West Classroom West Field House Parking Lot	10/4/2025
Mustangs Youth Football-Pee Wee Football Games David Lopez	West Stadium West Playing Field	9/14,9/21,10/12, 10/19, 10/26
Clyde Park District Mark Kraft	East Field House	Dec 2 2025-Feb 22 2026 Sun 9am-9 pm Tues/Wed/Thurs 6pm- 9pm

City Of Berwyn Recreation Anthony Martinucci	West Field House West Auxillary Gym	1/06/2026-3/8/2026 Sun 9am- 4pm Tues/Thurs 630pm- 930pm
Mustangs Youth Cheer and Mustang Youth Flag Football (MYC and MYFFL) Priscilla Campos	East Outdoor Field	8/25/2025-11/01/2025 Mon/Wed/Fri 630pm- 9pm
D99 Musical Ted Henley	East Auditorium	8/28-10/19 Mon-Fri 2:55pm- 630pm 9am-10pm

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 36-9005796
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

City of Berwyn Recreation 6501 W. 31st St. Berwyn IL 60402

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

708-788-2010
Anthony Martinucci (mhirschberg@ci.berwyn.il.us) Mavreen Hirschberg

DESCRIPTION OF EVENT/ACTIVITY:

CO-ED
2026 Winter Youth Soccer Program 3yrs. - 8th grade

ATTENDANCE (Breakdown by Adults and Children - will be verified):

ADULTS _____ CHILDREN 300-400

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM 1/6/2026 (Month/Day/Year) TO 3/8/2026 (Month/Day/Year)

TIME(S) OF EVENT: Sundays 9^{am}-4^{pm} / Tues/Thurs- 6³⁰^{am} 9³⁰^{pm}

SET UP (If Needed) _____

START _____

BREAKDOWN (If Needed) _____

END _____

ADDITIONAL NEEDS (Equipment or Special Requests):

Tuesday + Thursday's 6³⁰-9³⁰pm for Practices in fieldhouse
and auxiliary gym beginning 1/6/2026

Sundays January 2026 - 18th, 25th
9AM-4pm February 2026 - 1st, 15th, 22nd
March 2026 - 1st + 8th

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House <input checked="" type="checkbox"/>	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field *
Cardio Room	Weight Room	Parking Lot	Other <u>Auxiliary Gym</u>

*Specify Exact Location of Requested Use Fieldhouse + Aux gym

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
2. Each organization using the school facilities shall be responsible for the conduct of the people admitted and any damage or breakage incurred during the activity. The Board of Education is not responsible for any injury to persons attending, damage to personal property, or loss of personal effects.
3. All organizations must submit a certificate of insurance in accordance with all rules and regulations concerning facility usage including, but not limited to, naming J. Sterling Morton High School District 201 as an additional insured.
4. Class III applications must submit proof the organization is a qualified tax-exempt entity, such as the organization's IRS determination letter.
5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

SIGNATURE & PRINTED NAME

DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Pee Wee Football Games

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 80 CHILDREN 180

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM Sept 14th, 2025 (Month/Day/Year) TO Sept 14th, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 8am

BREAKDOWN (If Needed) _____ END 3pm

ADDITIONAL NEEDS (Equipment or Special Requests):

use field marker and scoreboard
Also concession area

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium <input checked="" type="checkbox"/>
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West Football field

ADDITIONAL RULES & REGULATION CONCERNING USE

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David Lopez
SIGNATURE & PRINTED NAME

8/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

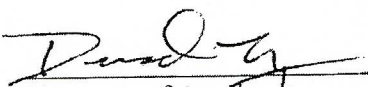
Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
Custodian notification and confirmation of coverage
Agreement execution
Invoice sent
Other requests notified and confirmed
School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Pee Wee Football Games

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 80

CHILDREN 180

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM Sept 21st, 2025 (Month/Day/Year) TO Sept 21st, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____

START 8am

BREAKDOWN (If Needed) _____

END 3pm

ADDITIONAL NEEDS (Equipment or Special Requests):

use field marker and scoreboard

Also concession area

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium <input checked="" type="checkbox"/>
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West Football field

ADDITIONAL RULES & REGULATION CONCERNING USE

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David Lopez
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

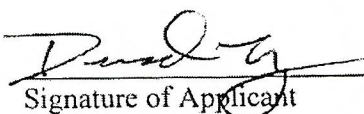
Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____


Signature of Applicant

6/9/25
Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
Custodian notification and confirmation of coverage
Agreement execution
Invoice sent
Other requests notified and confirmed
School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Pee Wee Football Games

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 80 CHILDREN 180

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM Oct 12th, 2025 (Month/Day/Year) TO Oct 12th, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 8am

BREAKDOWN (If Needed) _____ END 3pm

ADDITIONAL NEEDS (Equipment or Special Requests):

use field marker and scoreboard

Also concession area

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium <input checked="" type="checkbox"/>
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West Football field

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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David Lopez
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

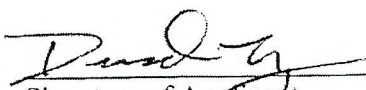
Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
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Invoice sent
Other requests notified and confirmed
School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112725
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Pee Wee Football Games

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 80 CHILDREN 180

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM Oct 19th, 2025 (Month/Day/Year) TO Oct 19th, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 8am

BREAKDOWN (If Needed) _____ END 3pm

ADDITIONAL NEEDS (Equipment or Special Requests):

use field marker and scoreboard
Also concession area

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
-------------	-------------------------------------------------	-----------------	-------------

FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium <input checked="" type="checkbox"/>
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West Football field

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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David Lopez
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____


Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
Custodian notification and confirmation of coverage
Agreement execution
Invoice sent
Other requests notified and confirmed
School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Pee Wee Football Games

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 80 CHILDREN 180

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM Oct 26th, 2025 (Month/Day/Year) TO Oct 26th, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 8am

BREAKDOWN (If Needed) _____ END 3pm

ADDITIONAL NEEDS (Equipment or Special Requests):

use field marker and scoreboard

Also concession area

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium <input checked="" type="checkbox"/>
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West Football Field

ADDITIONAL RULES & REGULATION CONCERNING USE

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David Lopez
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

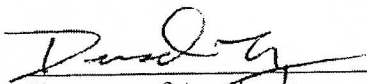
Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
Custodian notification and confirmation of coverage
Agreement execution
Invoice sent
Other requests notified and confirmed
School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez BerwynFootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Cheer practice

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 30 CHILDREN 50

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

NO

DATE(S) OF EVENT:

FROM July 21st, 2025 (Month/Day/Year) TO November 13, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 6pm

BREAKDOWN (If Needed) _____ END 8pm

ADDITIONAL NEEDS (Equipment or Special Requests):

Floor mats.

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
-------------	-------------------------------------------------	-----------------	-------------

FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House <input checked="" type="checkbox"/>	Main Gym <input checked="" type="checkbox"/>	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field *
Cardio Room	Parking Lot	Other	

***Specify Exact Location of Requested Use** _____

ADDITIONAL RULES & REGULATION CONCERNING USE

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 **David Lopez**
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted
Proof of Insurance Submitted
Proof of Non-Profit Submitted
School Sign Off (availability)
Custodian notification and confirmation of coverage
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School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 99-1112775
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Mustangs Youth Football and Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

David Lopez Berwynfootball@hotmail.com 708-997-1439

DESCRIPTION OF EVENT/ACTIVITY:

Football practice

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 30 CHILDREN 110

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

No

DATE(S) OF EVENT:

FROM July 21st, 2025 (Month/Day/Year) TO November 13, 2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START 6pm

BREAKDOWN (If Needed) _____ END 8pm

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West <input checked="" type="checkbox"/>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field <input checked="" type="checkbox"/> *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Morton West practice fields

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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3. All organizations must submit a certificate of insurance in accordance with all rules and regulations concerning facility usage including, but not limited to, naming J. Sterling Morton High School District 201 as an additional insured.
4. Class III applications must submit proof the organization is a qualified tax-exempt entity, such as the organization's IRS determination letter.
5. SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

David Lopez
SIGNATURE & PRINTED NAME

6/9/25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: _____

Custodial: _____

Security: _____

Food Service: _____

Sound/Lighting: _____

Equipment: _____

Other Fee(s): _____



Signature of Applicant

6/9/25

Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted

Proof of Insurance Submitted

Proof of Non-Profit Submitted

School Sign Off (availability)

Custodian notification and confirmation of coverage

Agreement execution

Invoice sent

Other requests notified and confirmed

School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 36-9005796
X Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

Berwyn Fire Dept. Division of Emergency Management

:

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

Division Chief Scott Waszak 708-901-3950

DESCRIPTION OF EVENT/ACTIVITY:

CERT class final scenario See Attached

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 75-100 CHILDREN _____

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

No

DATE(S) OF EVENT:

FROM 10/4/2025 (Month/Day/Year) TO 10/4/2025 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) X START 0800

BREAKDOWN (If Needed) X END 1600

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	Morton West X	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom X *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House X	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field *
Cardio Room	Parking Lot X	Other	

***Specify Exact Location of Requested Use** Available classrooms for the scenario attached

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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3. All organizations must submit a certificate of insurance in accordance with all rules and regulations concerning facility usage including, but not limited to, naming J. Sterling Morton High School District 201 as an additional insured.
4. Class III applications must submit proof the organization is a qualified tax-exempt entity, such as the organization's IRS determination letter.
5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

 Scott Waszak
SIGNATURE & PRINTED NAME

7/28/2025
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # ____ - ____
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

~~Riverside Little League~~ Alumni Class of 1975

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

Wanda Moy - 708-899-2923

DESCRIPTION OF EVENT/ACTIVITY:

Tour of School by Alumni - Class of 1975

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 25-40 CHILDREN 0

WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?

no

DATE(S) OF EVENT:

FROM 10/24/25 (Month/Day/Year) TO 10/24/25 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) 5:00 pm START 5:00 pm

BREAKDOWN (If Needed) _____ END 7:00 pm

ADDITIONAL NEEDS (Equipment or Special Requests):

Tour guide

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	<u>Morton West</u>	Freshman Center	Alternative
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field *
Cardio Room	Parking Lot	Other	

*Specify Exact Location of Requested Use Tour of School

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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Wanda Moy - Wanda Moy
SIGNATURE & PRINTED NAME

7/21/2025
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

USAGE SUMMARY FORM

Rental/Usage Fees:

Base Fee: 0

Custodial: 0

Security: 0

Food Service: 0

Sound/Lighting: 0

Equipment: 0

Other Fee(s): _____

Wanda Morz
Signature of Applicant

7/21/25
Date

Signature of Superintendent

Date

Signature of Business Office

Date

Business Office Only

Application Submitted

Proof of Insurance Submitted

Proof of Non-Profit Submitted

School Sign Off (availability)

Custodian notification and confirmation of coverage

Agreement execution

Invoice sent

Other requests notified and confirmed

School related hour calculation

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # ____ - ____
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

____ Clyde Park District, 1909 s Laramie Ave ____.

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

_Mark Kraft 7085160559 mkraft@clydeparkdist.org____

DESCRIPTION OF EVENT/ACTIVITY:

____ Soccer ____

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS _____ CHILDREN _____

**WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?**

DATE(S) OF EVENT:

FROM ____ December 2 2025 ____ (Month/Day/Year) TO ____ February 22 2026 ____
(Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START _Sun 9am-9pm Tues/Wed/Thurs 6pm-9pm

BREAKDOWN (If Needed) _____ END _____

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East <input checked="" type="checkbox"/>	Morton West <input type="checkbox"/>	Freshman Center <input type="checkbox"/>	Alternative <input type="checkbox"/>
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FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom <input checked="" type="checkbox"/>	Staff Cafeteria <input type="checkbox"/>	Senior Cafeteria <input type="checkbox"/>	Main Cafeteria <input type="checkbox"/>
Library <input type="checkbox"/>	Auditorium <input type="checkbox"/>	Little Theater <input type="checkbox"/>	Stadium <input type="checkbox"/>
Field House <input checked="" type="checkbox"/>	Main Gym <input type="checkbox"/>	Other Gym <input checked="" type="checkbox"/>	Locker Room <input type="checkbox"/>
Conference Room <input checked="" type="checkbox"/>	Pool <input type="checkbox"/>	Pool Locker Room <input type="checkbox"/>	Playing Field <input checked="" type="checkbox"/>
Cardio Room <input type="checkbox"/>	Parking Lot <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	

***Specify Exact Location of Requested Use** _____

ADDITIONAL RULES & REGULATION CONCERNING USE

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5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

SIGNATURE & PRINTED NAME

DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

Facility Request Information for Building Approval

Organization Name: Mustangs Youth Cheer and Mustang Youth Flag Football (MYC and MYFFL)

Address: 3211 cuyler Ave (Berwyn, IL 60402)

Contact Name: Priscilla Campos

Phone: 312-656-5393

E-mail: mustangsyffl@gmail.com

Organization Class: Class I

Tax-EIN#: 090-0787965

Event Description: Practice location for Cheer and Flag football (flag in the winter)

Athletic Facility being used?: Yes

Campus: Morton East **Facility:** ["Main Gym","Balcony gym"]

Event Date: 8/25/2025

Multiple Dates: monday, Wednesday and friday (08/25/2025 to 11/01/2025)

Event Time: 6:30pm to 8:30pm or 7pm to 9pm

Setup Time: N/a **Breakdown Time:** n/a

Open to the public?: No **Attendance:** 60

Will food be served?: No

Kitchen needed?: [Kitchen Use]

Type of food being served: [FoodBeingServed]

Tables needed?: No **How many:**[TableCount]

Chairs needed?: No **How Many:** [Chair count]

Purchasable tickets on site: No **Payment Type:** [Ticket Payment]

Is food purchasable: No **Payment Type:** [FoodPayment]

Fundraising or Sales during event: No **Payment Type:** [SF Payment]

IT/AV setup needed: No **Equipment needed:** [ITEquipment]

Additional Notes/Needs: [Additional Needs]

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 93-4389468

Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

MUSTANG YOUTH FLAG FOOTBALL LEAGUE

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

PRISCILLA CAMPOS 312-656-5393 ANAAVY@HOTMAIL.COM

DESCRIPTION OF EVENT/ACTIVITY:

Practice Monday to Friday

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS _____40_____ CHILDREN _____100_____not all at the same time

**WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?**

DATE(S) OF EVENT:

FROM _____12/01/2025_____ (Month/Day/Year) TO _____04/30/2026_____
(Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) _____ START _____6PM_____

BREAKDOWN (If Needed) _____ END _____10PM_____

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	x	Morton West		Freshman Center	x	Alternative	
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**WHATEVER CAN BE USED FOR INDOOR FLAG FOOTBALL
FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])**

Classroom	*	Staff Cafeteria		Senior Cafeteria		Main Cafeteria	
Library		Auditorium		Little Theater		Stadium	
Field House		Main Gym	X	Other Gym	*	Locker Room	
Conference Room	*	Pool		Pool Locker Room		Playing Field	*
Cardio Room		Parking Lot		Other	X		

***Specify Exact Location of Requested Use** Main Gym or balcony gym

ADDITIONAL RULES & REGULATION CONCERNING USE

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5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

Deamos
SIGNATURE & PRINTED NAME

1-9-25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN # 93-4389468

Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:

MUSTANG YOUTH FLAG FOOTBALL LEAGUE

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

PRISCILLA CAMPOS 312-656-5393 ANAAVY@HOTMAIL.COM

DESCRIPTION OF EVENT/ACTIVITY:

GAMES ON FRIDAY ONLY FOR FIELD HOUSE

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS _____ 40 _____ CHILDREN _____ 100 _____

**WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?**

DATE(S) OF EVENT:

**FROM _____ 1/01/2026 _____ (Month/Day/Year) TO _____ 04/30/2026 _____
(Month/Day/Year)**

TIME(S) OF EVENT:

SET UP (If Needed) _____ 5:45PM _____ START _____ 6PM _____

BREAKDOWN (If Needed) _____ END _____ 10PM _____

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	x	Morton West		Freshman Center	x	Alternative	
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**WHATEVER CAN BE USED FOR INDOOR FLAG FOOTBALL
FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])**

Classroom	*	Staff Cafeteria		Senior Cafeteria		Main Cafeteria	
Library		Auditorium		Little Theater		Stadium	
Field House	X	Main Gym		Other Gym	*	Locker Room	
Conference Room	*	Pool		Pool Locker Room		Playing Field	*
Cardio Room		Parking Lot		Other			

***Specify Exact Location of Requested Use** _____

ADDITIONAL RULES & REGULATION CONCERNING USE

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5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

D. Campos
SIGNATURE & PRINTED NAME

1-10-25
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED

FACILITY USAGE APPLICATION

J. Sterling Morton High School District 201

TYPE OF ORGANIZATION REQUESTING FACILITY USE: Tax EIN #93-4389468
Class I Class II Class III Class IV (Select one)

NAME & ADDRESS OF ORGANIZATION REQUESTING FACILITY USE:
Mustangs Youth Cheer

CONTACT NAME, EMAIL & PHONE NUMBER OF PERSON IN CHARGE OF ORGANIZATION:

Priscilla Campos cheermustangsyouth@gmail.com 312-656-5393

DESCRIPTION OF EVENT/ACTIVITY:
Practice Area

ATTENDANCE (Breakdown by Adults and Children – will be verified):

ADULTS 10 CHILDREN 90

**WILL ADMISSION BE CHARGED OR FEE COLLECTED FROM PARTICIPANTS?
IF SO, WHO OR WHAT ENTITY RECEIVES THE PROCEEDS?**

NO

DATE(S) OF EVENT: Monday to friday

FROM 08-15-25 (Month/Day/Year) TO 04-30-26 (Month/Day/Year)

TIME(S) OF EVENT:

SET UP (If Needed) START 7pm

BREAKDOWN (If Needed) END 9pm

ADDITIONAL NEEDS (Equipment or Special Requests):

APPLICATION FOR USE OF PROPERTY/FACILITIES: (Check Applicable Location[s])

Morton East	X	Morton West	Freshman Center	Alternative
-------------	---	-------------	-----------------	-------------

FACILITIES OR PROPERTY REQUESTED FOR USE: (Check Applicable Area[s])

Classroom *	Staff Cafeteria	Senior Cafeteria	Main Cafeteria
Library	Auditorium	Little Theater	Stadium
Field House	Main Gym	Other Gym *	Locker Room
Conference Room *	Pool	Pool Locker Room	Playing Field *
Cardio Room	Parking Lot	Other	

***Specify Exact Location of Requested Use field house or whatever is available**

ADDITIONAL RULES & REGULATION CONCERNING USE

1. District staff members must make arrangements for any needs they may have concerning the use of the facilities, including but not limited to audio visual equipment, food service, maintenance, etc. Such arrangements may require payment depending upon the rules governing facilities usage.
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5. **SMOKING OR THE USE OR POSSESSION OF INTOXICATING LIQUORS AND DRUGS IS NOT ALLOWED IN OR ON DISTRICT 201 PROPERTY.**

I, as the applicant submitting this Request for Facilities Use, agree to the above rules and regulations concerning the usage of District 201 Property and/or Facilities as well as the Policies and Procedures of the Board of Education of District 201.

Priscilla Campos
SIGNATURE & PRINTED NAME

08/25/2025
DATE

*****OFFICE USE ONLY*****

BUSINESS OFFICE SECY	PERMIT NO.	DATE RECEIVED/APPROVED