

**POLICY TITLE:     Building Rental**

**POLICY NO: 910 F3  
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## **BUILDING RENTAL CHECKLIST**

**Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Contact Person** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Date of Event** \_\_\_\_\_ **Hours** \_\_\_\_\_

<b>Item</b>	<b>Completed (√)</b>	<b>Status</b>
Application for Rental filled out and turned in		
Request for Waiver filled out and turned in		
Use of the building approved by building administrator		
\$100.00 cleaning deposit paid		
Renters received building rental responsibility checklist		
Custodian has been notified of date and what needs to be set up		
Supervisor assigned if after hours (Name)		
Custodian or supervisor spot checked facility after event		
Supervisor filled out Time Sheet		
Cleaning Deposit Refunded (Amount)		
Rental/Supervision Fees Paid (Amount)		
School sent fees collected to District Office		