

School Year: _____
 In - House or PTO Usage only
 Space Reservation Request

**Hawthorn School
 District #73**

Please complete this form by including all requested information – Incomplete requests will delay scheduling.
Submission of this form does NOT constitute a reservation

**District
 Use Only**

Please Print or Type (Fields with * must be filled out)

* Event Name / Purpose for which facility is to be used: _____

* Name of Authorized Organization Representative: _____

* Daytime Phone: (____) _____ Evening Phone: (____) _____

* Cell Phone: (____) _____ E-mail: _____

Time and date facility is to be used: Day and Date: _____

(if more than one date is being request, please fill out page 2)

Arrival time: _____ am/pm Departure time: _____ am/pm

* Estimated Attendance: _____ * Building Requested: _____

* Facility Requested: Multi-Purpose Room _____ Gym _____ Cafeteria _____
 (Note: Middle North, Townline, Elementary South and Aspen do NOT have a Multi-Purpose Room)

Resource Center / Library _____ Must have written permission from the building librarian

* Set Up Instructions:

- | | | |
|--|--|---|
| <input type="checkbox"/> Theater Style | <input type="checkbox"/> U-Shape | <input type="checkbox"/> Number of chairs _____ |
| △ with aisle | <input type="checkbox"/> Classroom / lunchroom | <input type="checkbox"/> Number of tables _____ |
| △ no aisle | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

Other Information/Special Needs: _____

Diagram **must** be included for set up instructions. Please use diagram form/download. } } } }

NOTE: Hawthorn School District #73 reserves the right to make any adjustments in the areas as scheduled if it becomes necessary. Every effort will be made to provide all areas as scheduled for groups/organizations. In case of a school conflict, that group/organization will be notified immediately and alternative arrangements will be attempted. An invoice for charges incurred, if any, will be sent to the address filled in above.

The applicant hereby agrees to use the described facilities in accordance with the rules and regulations established by the Hawthorn School District #73 Board of Education.

* Date _____

*Signature of Authorized Organization Representative _____

To Be Completed By School Officials

Date Received in District Office _____

At this time, this application is approved due to no conflicts with school activities in the use of the above facilities.

Business or Facilities Manager or designee _____

Date Approved & Placed
 On District Calendar _____

Please return completed form(s) to:
 Building Schedule Center
 Hawthorn School District 73

Cert / Ins. rec'd _____
 Confirmation sent _____

Notations:

S c h o o l Y e a r : _ _ _ _ _
I n - H o u s e o r P T O U s a g e o n l y
S p a c e R e s e r v a t i o n R e q u e s t

Event Name / Purpose for which facility is to be used: _____

Page _____ of _____

For more than one date requested, please fill out this page

Time and date facility is to be used:

Day _____ / Date _____	Arrival Time: _____ am/pm	Departure Time _____ am/pm
Day _____ / Date _____	Arrival Time: _____ am/pm	Departure Time _____ am/pm
Day _____ / Date _____	Arrival Time: _____ am/pm	Departure Time _____ am/pm
Day _____ / Date _____	Arrival Time: _____ am/pm	Departure Time _____ am/pm
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Day _____ / Date _____	Arrival Time: _____ am/pm	Departure Time _____ am/pm

* Date

*Signature of Authorized Organization Representative