

Arcadia Neighborhood Learning Center

Event/Activity/Facilities Approval Form

Date of Event _____ Time of Event _____ to _____

Person or Group requesting facility _____ Sponsor Phone # _____

Purpose of Activity _____ Vacate Time _____

Cafeteria _____

Classroom (s) _____

Gym _____

Library
Confirm availability thru library _____

Other _____

Heating / Air Condition Request

This is to be used when air condition or heating is needed Beyond normal occupied times as stated below.

MONDAY - FRIDAY 6:00am - 3:30PM
Weekends by request only

All requests must be made 72 hours in ADVANCE of event

Reason for Request _____

of Days Needed _____

Dates Needed: FROM _____ TO _____

Hours Needed FROM _____ TO _____

Detailed description event/activity/fundraiser (diagram/theme/design) (Use back of form if needed)

Sponsor Approval _____

Plant Supervisor Approval _____

Cafeteria Supervisor Approval _____

Administrator Approval _____