## Dallas Center-Grimes Community Schools Facility Request Form

School Building/Facility	Date(s) Requested	Estimated Attendance	Activity Start Time
Room/Area Requested		% of DCG Participants	Activity End Time
Event Title	1		
Organization			
Contact Person	Phone	Email	
Billing Address			
Event Description/Services Needed/Equipment Needed			
Applicant Commments			
I have read, understand and agree to abide by all PROCEDURES, RULES, REGULATIONS AND INSURANCE REQUIREMENTS specified on the DCG Facility Use Guidelines. YES NO			
Signature of Applicant		Date	
Administrative Use Only			
Personnel Fee	Equipment Fee	Techology Fee	Rental Fee
Administrative Comments			
Actvities Director Signature		Date	