

## FACILITY USE FIELD USE REQUEST

*Please read both sides of this form.*

### **Please follow these steps:**

1. Fill out the request form completely and **print legibly**.
2. Submit request form by fax, 720-561-5950 or by U.S. mail to Community School Program, Attn: Facility Use, P.O. Box 9011, Boulder, CO 80301.
3. Submit your **Proof of Liability Insurance** as described in the Field Use Terms to the Facility Use office via fax, 720-561-5950 or U.S. mail.  
**Please note: we are not able to process your request without Proof of Liability Insurance**
4. If you are requesting multiple dates, circle the dates on a copy of the BVSD school calendar. You will need to fax or mail your request form and the calendar to Facility Use. The school calendar may be found on the Facility Use web page or in the Facility Use office.

### **Please note:**

- School events take priority. Your permit or a date on your permit may be cancelled due to school activities. You may re-schedule based on availability.
- Community youth activities take priority.
- Once your permit is ready our office will contact you.
- Your permit must be paid for in advance.
- It takes a minimum of 7 – 10 business days to process the permit.
- Possible additional fees:
  1. A monitor may be required based on the size of the event.
  2. A large group surcharge may be added as noted on the Facility Use Rate Schedule
- **Until the permit has been processed, the requested date/space has not been reserved. We recommend not advertising your event until the permit has been finalized.**

**FACILITY USE  
FIELD USE REQUEST FORM**

*Please read both pages of this form. Fill out the request form completely and **print** legibly.*

Organization: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Telephone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Event/Activity: \_\_\_\_\_

On Site Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

# of Youth Participants: \_\_\_\_\_ # of Adult Participants: \_\_\_\_\_

School Preference: 1<sup>ST</sup> \_\_\_\_\_ 2<sup>ND</sup> \_\_\_\_\_ 3<sup>RD</sup> \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Days: Su M T W Th F S

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

*If your schedule is irregular, please circle the dates you're requesting on a copy of the school calendar and submit it with your request form. This will allow us to process your request accurately.*

Are you charging a fee for this event? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, how much \_\_\_\_\_

**Please note:** Until the permit has been processed, the date/space has not been reserved. We recommend not advertising your event until the permit has been completely processed.

*I affirm that I have read and agree to comply to with the BVSD Facility Field Use Terms*

**Community School Program/Facility Use  
6500 East Arapahoe, Boulder, CO 80303  
Mailing Address:  
P.O. Box 9011  
Boulder, CO 80301  
Phone: 720-561-5965 Fax: 720-561-5950**