

Rental Fees

Custodial Fee Est mate

Cafeteria Fee Estimate Total Deposit Due

Audio Technician Fee Estimate

MAR 9 2022

REQUEST FOR USE OF FACILITY

PLEASE TYPE OR PRINT (PRESS HARD)

REQUESTED		
Name of Organization MT. Suffolk		
Responsible individual KAU W. Kins		
Street Address 1602 Gunston De		
City_Suffolk State_		_zip_ 23434
	757 (547-3388	Cell 757 (335-0755)
School/Facility requested Kings Fick High Sci	houl	
Rooms or facility desired Andiforium	i	
Equipment needed		
Other comments		
Name of program The Mount Suffolk Sundy Purpose of program Church Service	Service	
Purpose of program Church Service		
Number of people expected /00	Admission fee or donation	None
Date(s) needed	Time from	Time to
/0		
6/2/22 to 804-2022		
event. In the event of cancellation, written notice must be provided may be forfeited. I further understand that the Suffolk City Sc expressed and/or implied, regarding the condition of property buccessors, and/or assignees, are not responsible for providing a whatsoever, in order to accommodate and/or facilitate the applical limited custodial, cafeteria, and audio technician services, if applicatinging to any person and/or property caused by applicant, its agapplicant. Furthermore, the applicant agrees to hold Suffolk City however caused, for injuries suffered by the applicant, its agents, shall comply with all applicable rules and regulations of the Suffol also understands that the possession and/or use of alcoholic beveroducts is prohibited in all buildings. For further information, call	chool Board, its agents, successors and being used by the applicant. Also, the conditioning, heating, special lighting ant's use of the facility, except that the cable. The applicant shall assume full rents, assignees, guests, and/or invitees, y School Board harmless from any claim assignees, guests, and/or invitees, while olk City School Board, which are incorparenages is prohibited on all school properties.	for assignees, make no warranties, either a Suffolk City School Board, its agents, g, furniture set-up, or any other services a Suffolk City School Board will provide esponsibility for any loss, damage, and/or while the property is being used by the ims, suits, and/or actions whatsoever and the property is being used. The applicant orated herein by reference. The applicant
Applicant Signature		Date
	*SCHOOL BOARD USE ONLY*****	**************************************
PRINCIPAL Approved Comments		□ Disapproved
Estimated additional hours: Custodial	Audio Technician	Caseteria
Signed Signed	Date	3/7/22
FACILITIES DEPARTMENT (Approved		☐ Disapproved
Comments No. 1		
Signed	Date	3-9-22
FINANCE DEPARTMENT	REMIT PAYMENT TO:	SUFFOLK PUBLIC SCHOOLS

NO LATER THAN

Suffolk, Virginia 23439-1549

Attn: Finance Department

2505/

P.O. Box 1549