

**Holy Hill Area School District**  
3117 State Road 167  
Richfield, WI 53076-0127

**REQUESTS MUST BE RENEWED ANNUALLY**

APPLICATION DATE \_\_\_\_\_

1. Name of Organization \_\_\_\_\_
  2. Request use of \_\_\_\_\_ BUILDING \_\_\_\_\_ GROUNDS \_\_\_\_\_ FRIESS LAKE ELEMENTARY \_\_\_\_\_ RICHFIELD MIDDLE SCHOOL
  3. Purpose/Event Type (Describe) \_\_\_\_\_ Expected Attendance \_\_\_\_\_
  4. Date(s) \_\_\_\_\_ Start Time: \_\_\_\_\_ AM/PM End Time: \_\_\_\_\_ AM/PM
  5. Location(s) Requested \_\_\_\_\_
  6. Equipment requested \_\_\_\_\_
  7. Name of Supervisor or Group Leader (Must be over 21) \_\_\_\_\_
- Address \_\_\_\_\_ Phone \_\_\_\_\_

**THE FOLLOWING RESPONSIBILITIES ARE REQUIRED BY GROUPS WHEN USING THE SCHOOL DISTRICT FACILITIES:**

- ☐ Unless otherwise arranged, all evening activities must end at 7:45 PM. Groups must be off the premises by that time.
- ☐ Gymnasium Use: ALL participants must change from "street shoes" into gym shoes (non-marking) BEFORE entering the gym.
- ☐ The District staff will assist in setting up chairs, tables etc. for each group. It is the responsibility of the person(s)/organization using the facility to leave the area used in its original condition, including garbage removal, sweeping the floor, sponging off tables, etc. If not completed properly, the group will be charged one hour of custodial clean up time.
- ☐ If additional snow plowing of the parking lot is necessary for the organization's activities, the group will be invoiced for the cost of the plowing service.
- ☐ **FEE POLICY:** Groups may be charged for usage and will be invoiced on a monthly basis. Payment is expected within two weeks or the group's permit will be revoked. Mark the necessary area(s) with the length of time needed.  
Security Deposit: \$100.00 – **Checks made payable to HHASD. Security deposit must be paid prior to use of building.**

The charges are as follows:

Gym: \$20/hour \_\_\_\_\_ Kitchen/Concession: \$20/hour \_\_\_\_\_ Library: \$10/hour \_\_\_\_\_ Classroom: \$10/hour \_\_\_\_\_  
Cafeteria/Commons: \$10/hour \_\_\_\_\_ Grounds: \$5/hour \_\_\_\_\_ Grounds w/ Bathroom Access: \$15.00 \_\_\_\_\_  
Custodial: As Needed \_\_\_\_\_ Equipment Rental: As Needed \_\_\_\_\_ Large Group Surcharge: As Needed \_\_\_\_\_

I, the undersigned, representing my organization, agree to follow the administrative rules and regulations. I understand that if any person is involved in acts of willful or malicious damage to school property and/or contents or if the group's participants are undisciplined, this will result in suspension of the building use permit.

\_\_\_\_\_  
Full name of responsible party \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

**ACTION OF SCHOOL DISTRICT – TO BE COMPLETED BY THE BUILDING PRINCIPAL**

Building Use Permit Granted: \_\_\_\_\_ YES \_\_\_\_\_ NO

\_\_\_\_ You will be invoiced. Future use subject to prompt payment. \_\_\_\_ You will not be charged for the use of the room.

\_\_\_\_ You may use the equipment requested. \_\_\_\_ You may not use the equipment requested

Custodial fees to be charged: (To be completed by the office) \_\_\_\_\_ Building Access \_\_\_\_\_

Security Deposit: \$100.00 – **Checks made payable to HHASD. Security deposit must be received prior to use of the building/grounds.**

Comments: \_\_\_\_\_ Room(s) Assigned: \_\_\_\_\_

Administration Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

\_\_\_\_ Security Deposit received – Check # \_\_\_\_\_ Building Access programmed by the Building & Grounds Supervisor

\_\_\_\_ Building Use Regulations signed/received

\_\_\_\_ Invoiced

Requesting Agent \_\_\_\_\_ Building/Custodial \_\_\_\_\_ Food Service \_\_\_\_\_ Athletics \_\_\_\_\_ Secretary \_\_\_\_\_ TW (Deposit/Invoice) \_\_\_\_\_