

Rob Bellinger
 Building Reservations
rbellinger@isd271.org
 TEL: 952-806-7888



Community Education
 Building Reservations
 150 East 98th Street
 Bloomington, MN 55420

Permit # _____

**FACILITY USE REQUEST FORM
 (non-school/district events)**

Organization / Group Name _____ Day Phone _____
 Main Contact Name _____ Evening Phone _____
 Address _____ Email _____
 City / State / Zip _____ FAX _____

EVENT: _____	Time Requested (note: rental time must INCLUDE setup/cleanup time) Set-up start time: _____ Event start time: _____ Event end time: _____ Clean-up end time: _____
DATES: _____	

Attendance est.: _____	

Location Preference

<input type="checkbox"/> Jefferson High School	<input type="checkbox"/> Oak Grove Middle	<input type="checkbox"/> Hillcrest Elementary	<input type="checkbox"/> Poplar Bridge
<input type="checkbox"/> Jefferson Activity	<input type="checkbox"/> Olson Middle	<input type="checkbox"/> Indian Mounds Elementary	<input type="checkbox"/> Ridgeview Elementary
<input type="checkbox"/> Kennedy High School	<input type="checkbox"/> Valley View Middle	<input type="checkbox"/> Normandale Hills	<input type="checkbox"/> Valley View Elementary
<input type="checkbox"/> Kennedy Activity	<input type="checkbox"/> Pond Family	<input type="checkbox"/> Oak Grove Elementary	<input type="checkbox"/> Washburn Elementary
	<input type="checkbox"/> Southwood Center	<input type="checkbox"/> Olson Elementary	<input type="checkbox"/> Westwood Elementary

Room Preference

<input type="checkbox"/> Gymnasium: _____	<input type="checkbox"/> Auditorium	<input type="checkbox"/> Lunchroom/Cafeteria	<input type="checkbox"/> Media Center
<input type="checkbox"/> Team Room	<input type="checkbox"/> Classroom: # _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Indoor Pool

Special Needs

<input type="checkbox"/> Podium	<input type="checkbox"/> Full sound system	<input type="checkbox"/> TV / VCR	<input type="checkbox"/> # of tables/chairs
<input type="checkbox"/> # of microphones	<input type="checkbox"/> Stage lighting	<input type="checkbox"/> Overhead projector	<input type="checkbox"/> Other: _____

Detailed Instructions / Notes

Please allow a **minimum** of two weeks for your request to be processed. The annual \$20 Permit Fee will be billed on your first invoice. This permit fee is paid once per school year for each building and covers the fiscal year July 1 to June 30.

Signature of Main Contact

Date