

LHS Event Request Form

One form per unique event
 Multiple "like" events (ex. choir dates) please add attachment
 Please fill out as much information as possible

Return form to: *additional forms available at*
 Joel Babinec *www.luther.k12.wi.us*
 1501 Wilson St *or school office*
 Onalaska, WI 54650-3142
 babijoel@luther.k12.wi.us (608) 783-5435 x1645

Requesting Organization	
Requesting Person	
Requestor contact info	Address _____ City _____ State _____ Zip _____ Home phone (____) _____ Work phone (____) _____ ext. _____ Cell phone (____) _____ Email address _____
Event Supervisor (if not requestor)	
Event Supervisor info (if not requestor)	Address _____ City _____ State _____ Zip _____ Home phone (____) _____ Work phone (____) _____ ext. _____ Cell phone (____) _____ Email address _____
Date request submitted	
Event requested (spelled correctly & stated concisely)	
Event date	<input type="checkbox"/> Tentative <input type="checkbox"/> Confirmed (please check one)
Event start time	
Time building to be open (if different from start time)	
Event end time	
Recurrence pattern	<input type="checkbox"/> One time <input type="checkbox"/> Varies <input type="checkbox"/> Yearly <input type="checkbox"/> Monthly <input type="checkbox"/> Other/Specify _____
Range of recurrence (ex. starts 3rd week of school and stops 10th week of school, etc.)	
Attachment included?	<input type="checkbox"/> Yes <input type="checkbox"/> No (please check one)
Multiple events give total # for school year	
Area(s) to be used	<input type="checkbox"/> ACE new gym <input type="checkbox"/> Aux old gym <input type="checkbox"/> Commons <input type="checkbox"/> Kitchen <input type="checkbox"/> Indoor Concessions <input type="checkbox"/> ACE Boys Lck Rm <input type="checkbox"/> ACE Girls Lck Rm <input type="checkbox"/> Aux Boys Lck Rm <input type="checkbox"/> Aux Girls Lck Rm <input type="checkbox"/> Mezzanine <input type="checkbox"/> Lobby <input type="checkbox"/> Band Rm <input type="checkbox"/> Choir Rm <input type="checkbox"/> LMC/Study Hall <input type="checkbox"/> Weight Rm <input type="checkbox"/> Conference Rm <input type="checkbox"/> Football field <input type="checkbox"/> Track <input type="checkbox"/> Baseball field <input type="checkbox"/> Softball field <input type="checkbox"/> Football practice field <input type="checkbox"/> Press Box/Outdoor Concessions <input type="checkbox"/> Classroom(s) [identify # needed or specific rooms] _____
Equipment requested (specify in Comments)	<input type="checkbox"/> Chairs # _____ <input type="checkbox"/> Tables # _____ <input type="checkbox"/> Phone <input type="checkbox"/> Computer/printer/Internet <input type="checkbox"/> AV <input type="checkbox"/> Athletic <input type="checkbox"/> Kitchen <input type="checkbox"/> Music <input type="checkbox"/> PA <input type="checkbox"/> Other (specify in Comments)
Comments Special Requests (ex. reason for event, alternates each year, etc.)	
Office use only	
Approval	Schedule <input type="checkbox"/> Yes <input type="checkbox"/> No Building <input type="checkbox"/> Yes <input type="checkbox"/> No Principal <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for denial	
Request granted under following conditions:	