

FEE WAIVER REQUEST FORM

PERSON MAKING REQUEST _____

NAME OF ORGANIZATION _____

IRS/NON PROFIT TAX ID# _____

ADDRESS & PHONE NUMBER _____

PURPOSE OF RENTAL & NUMBER OF GUESTS _____

FACILITY(S) REQUESTED _____

EVENT START DATE _____ ENDING DATE _____

EVENT START TIME _____ ENDING TIME _____

A TYPED LETTER ON THE REQUESTING ORGANIZATION'S LETTERHEAD MUST BE ATTACHED TO THIS REQUEST. THE LETTER SHOULD INCLUDE THE REASON FOR REQUESTING A FEE WAIVER AND ANY SPECIFICS PERTINENT TO THIS EVENT.

SIGNATURE DATE

OFFICE USE ONLY

APPLICABLE FEES

FEES WAIVED

RENTAL FEES \$ _____

\$ _____

CUSTODIAL FEES \$ _____

\$ _____

LIGHTS \$ _____

\$ _____

ALCOHOL PERMIT \$ _____

\$ _____

SETUP/TAKE DOWN \$ _____

\$ _____

DUMPSTER FEES \$ _____

\$ _____

TOTAL FEES DUE \$ _____

COMMITTEE'S COMMENTS: _____

REQUEST APPROVED? YES NO

DISTRICT ADMINISTRATOR'S SIGNATURE _____