



Reynolds High School Facility Request Form

(Please complete five weeks prior to any event)

Name of Event: Club Fair Tripod/Decoration Set-Up (GSA & MSA)

Name of Group: RHS Gender Sexuality Alliance & RHS Muslim Student Association

Name of Requestor: Annarie Wergeland

Contact Info: Phone: 503-860-9954 Email: awergeland@rsd7.net

Description of Function: Setting up tripods with decor in preparation for the Club Fair on 9/27. Hoping to get into MPR after cheer practice on Back To School Night for set up.

Is this event a fundraiser? No Yes *If yes, you must also submit a Fundraiser Request Form*

Facility Requested (i.e. gym, MPR, etc.):

MPR - it will just be me setting up 2 tripods with decorations, no student/parent helpers

Date(s) of Event: 9/26/23 Day(s) of Week: Tuesday
Check Availability on Master Calendar Prior to Submitting Request <http://rhs.reynoldssd7.tandemcal.com/>

Set-Up time: 30 min Start time: 6:45pm End time: 7:15pm Breakdown/Departure time: 7:15

Name of RSD Staff Member present at event: Annarie Wergeland - no students/parents

Contact Info (if different than requestor) Phone: _____ Email: _____

Set-Up Requested:

- | | | |
|---|---|---|
| <input type="checkbox"/> Chairs | <input type="checkbox"/> Sound System | <input type="checkbox"/> Projector/Screen |
| <input type="checkbox"/> Round Tables | <input type="checkbox"/> Bleachers (gym only) | <input type="checkbox"/> Off Hour Custodial (additional cost) |
| <input type="checkbox"/> Rectangular Tables | 1 _____ Number of People attending | |

If specific layout is needed, please attach a diagram

Office Use Only

- | | |
|---|---|
| <input type="checkbox"/> Event Approved | <input type="checkbox"/> Event Denied |
| <input type="checkbox"/> Added to Master Calendar | |
| Copy sent to: | <input type="checkbox"/> Requestor <input type="checkbox"/> Custodial <input type="checkbox"/> Activities
<input type="checkbox"/> Athletics <input type="checkbox"/> Main Office Reception <input type="checkbox"/> Arts Coordinator
<input type="checkbox"/> Other: _____ |

Date Received: _____ Reviewed By: _____

Signature: _____ Date: _____