

El Capitan K-12 School

School Facility Use Form For extra curricular activities

I am requesting the use of the following school facilities for the date and time specified. I understand that as the sponsoring teacher, I will be responsible for student supervision at all times and ensure proper care of the facility during the activity.

Check the following that apply:

Gym Auditorium Room # Ball Fields Other _____

Date: _____ Time: _____

Activity: _____

Supervising Teacher: _____

Mary Timpson, Business Manager _____

Fawneta Caroll, Principal _____

Carol Timpson, Superintendent _____

When all signatures have been obtained, return form to main office.