

**HIGHLANDS SCHOOL DISTRICT  
REQUEST/PERMIT FOR USE OF SCHOOL FACILITIES**

Please complete form for building request: (Must be completed and submitted at least one month in advance for Board Approval.)

School \_\_\_\_\_ Area \_\_\_\_\_  
you wish to use.

Date(s) From \_\_\_\_\_ to \_\_\_\_\_ Hours from \_\_\_\_\_ to \_\_\_\_\_ (am or pm)

Type of Activity \_\_\_\_\_

Name of Group \_\_\_\_\_ Responsible \_\_\_\_\_

Address \_\_\_\_\_

Phone Number daytime \_\_\_\_\_ Cell number \_\_\_\_\_

Please answer all of the following questions:

1. Will there be an admission charge? \_\_\_\_\_ Amount? \_\_\_\_\_
2. Please estimate the anticipated attendance \_\_\_\_\_
3. Do you need spotlights, public address systems, stage lights, projector, etc?  
\_\_\_\_\_
4. Please indicate if you need air conditioning/heating \_\_\_\_\_
5. Will you need additional rooms or rest rooms other than the area requested above? If so, where?  
\_\_\_\_\_
6. Do you have liability insurance? \_\_\_\_\_ Carrier \_\_\_\_\_

***Please be informed you will be charged for cafeteria expenses, custodial time, security time, audio visual time, and auditorium supervisor's time, if applicable. (See fee schedule attached.)***

**Please submit \$200.00 deposit payable to: Highlands School District.**

\*\*Non profit group's deposits will be returned at the end of the event as long as no damages to property have occurred.

***The Board shall be held harmless by the user for any liability that arises from use of school facilities by any non-school related organization, individual, or activity. Proper proof of liability insurance must be provided, if applicable.***

***I agree to terms of this permit, fee schedule of all applicable charges and accept responsibility.***

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit completed form and deposit to:

724-226-0120

724-226-0434 Fax

Facilities Coordinator  
Highlands High School  
1500 Pacific Avenue  
Natrona Heights, PA 15065

This section to be completed by District personnel after permit is approved by the Highlands School Board.

Please be informed your request has been approved as stated above. **This permit must be in your possession during the event. District personnel have the right to ask to see this permit.**

Building Principal \_\_\_\_\_

Facilities Coordinator \_\_\_\_\_

