

Applicant: _____
Email: _____
Day Phone: _____ **Fax:** _____

School Site: _____
Event Dates: _____
 List Specific Dates and Times of Use on Form 2900-S

Expected Attendees: (include audiences) **Adults:** _____ **Children:** _____

User/Organization: _____

Event Description: _____

Per Board Policy 7400.2: Activities not sponsored by the Wake County Public School System are non-school activities as defined by G.S. 115C-524(b).

CSUID:	The Community Schools User ID Number (CSUID) is located on your Community Schools Invoice. If using a CSUID, please use the section below to notify us of any changes to your organization.		
OR Complete This Section	User/Organization is	<input type="checkbox"/> WCPSS <input type="checkbox"/> Profit <input type="checkbox"/> Non-Profit <input type="checkbox"/> Other	Non-profit / Federal Tax ID #
	Applicant Address:		Evening Phone:
			Cell Phone:
	Secondary Contact:		Day Phone:
	Address:		Evening Phone:
			Cell Phone:
	Email:		Fax:
	Billing Contact:		Day Phone:
	Address:		Evening Phone:
			Cell Phone:
	Email:		Fax:

Your application cannot be processed and remains incomplete without the following:

- Completed *Space Worksheet* (Form 2900-S) or *Equipment Worksheet* (Form 2900-E), or both as applicable.
- Current Certificate of Liability Insurance
- Attached On file with Community Schools
- \$1 million Commercial General Liability Coverage per occurrence and \$2 million annual aggregate. Certificate must list "Wake County Board of Education" as Certificate Holder and Additional Insured.

Invoice this Event: Each month Each quarter Whole Event
 Please send invoices by: Postal mail Email Fax

I have read and agree to abide by the Guidelines for Community Users (Form 2900-G) and **Board Policy 7400 and 7410** (see <http://www.wcpss.net/policy-files/> for Board Policies). I also agree that the above information is correct and that the attachments listed to the left are being submitted with the Facility Use Application.

Applicant Signature

Date

Your first invoice will include a \$35 Processing Fee

Signature on this Application does not constitute a contract for use of Wake County Public School System facilities. A contract for use will be sent upon successful processing of your application.

School Use	Personnel: <input type="checkbox"/> Required <input type="checkbox"/> None <input type="checkbox"/> Other Specify: _____ <small>(Check all that apply)</small>	
Personnel Required	Start and Stop Times	Specific Dates and Repeat Ranges or 2900-S line #
Custodian	—	
Facility Supervisor	—	
Staff Technician	—	
Student Technician	—	
	—	
Indicate Weekly Repeats:		
		Su M T W Th F Sa
<input type="checkbox"/> Additional Form 2900-P attached		
If more space is required, download Form 2900-P from http://cs2.wcpss.net/		
Comments:		
Recommend for Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No:		
Principal Signature	Date	
Forward signed application to: Community Schools Community Use 3600 Wake Forest Road Raleigh, NC 27611-8041		
<small>Principal's Signature on this Application does not constitute approval for use of Wake County Public School System facilities.</small>		

Please Print Legibly

User /Organization: _____

School Site: _____

To be completed by the Applicant											School Use					
Specific Dates and Repeat Ranges <i>If a weekly repeating event, list Start and Stop Dates</i>								# Days Total	Start and Stop Times <i>Include all time on premises</i>	Spaces Requested	Room #	HVAC #				
9/11/04, 9/14/04		9/19/04 - 11/15/04		Indicate Weekly Repeats:				11	6:30 pm – 9:00 pm	e.g: Classroom	101	CLAS1				
	(Su)	M	T	(W)	Th	F	Sa									
1.	Su	M	T	W	Th	F	Sa							–		
2.	Su	M	T	W	Th	F	Sa							–		
3.	Su	M	T	W	Th	F	Sa							–		
4.	Su	M	T	W	Th	F	Sa							–		
5.	Su	M	T	W	Th	F	Sa							–		
6.	Su	M	T	W	Th	F	Sa							–		
7.	Su	M	T	W	Th	F	Sa							–		
8.	Su	M	T	W	Th	F	Sa							–		
9.	Su	M	T	W	Th	F	Sa							–		
10.	Su	M	T	W	Th	F	Sa							–		
11.	Su	M	T	W	Th	F	Sa							–		
12.	Su	M	T	W	Th	F	Sa							–		
13.	Su	M	T	W	Th	F	Sa							–		
14.	Su	M	T	W	Th	F	Sa							–		
15.	Su	M	T	W	Th	F	Sa							–		
16.	Su	M	T	W	Th	F	Sa		–							
17.	Su	M	T	W	Th	F	Sa		–							

User Signature

Date

Principal Signature

Date

Community Schools
Community Use