



## APPLICATION FOR USE OF SCHOOL DISTRICT PROPERTY INTERNAL USE FORM

\*Additional form required for the use of Kulp Auditorium and Joe Moresco Stadium and Bredbrenner Field.\*

Date Request Submitted:
The members of (specify group) Brain Team request the permission be granted for the use of (specify location)
Contact Person: Ben Kirk Phone Number: (607) 329-6005 Email: bkirk@icsd.k12.ny.us
ALL BUILDINGS WILL BE LOCKED BEFORE AND AFTER THE REQUESTD STARTED AND END TIMES. PLEASE ALLOW YOURSELF ENOUGH TIME TO SET-UP AND CLEAN UP THE SPACE REQUESTED.
Dates Requested:
Time Requested: Start: 3:30 End: 5:00
Time of Event: Start: $3.45$ End: $4.30$
Will you require custodial staff:   Yes   No
Please list any furniture you will need. Be specific and give diagrams for all set ups.
Will you require kitchen use? Tyes No
Will you require additional personnel services? ☐Yes ☒No  If yes, please specify:
 Name of person who is certified in AED equipment and will be providing services at your event:
Signature of Applicant: Date:
Received by:  Administrator: Head Custodian: Food Services Dir.:
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