BELLEVRECEIVED	Bellevue Sc	<mark>E APPLICATION</mark> :hool District e, WA 98005; 425-456-4500	APPLICATION ND. 67813	
INSTRUCTIONS: PLEASE PRINT. The applicant is to complete PAR information provided. For further information, refer to Policy 95 Name/Organization: THS Drill Team Contact Person: Mary Ruble OR Coa Billing Address: Belleville WA 98008 E-mail Address: Mary ruble Oconcast Daytime Phone: (425) 641-4432 Non-Profit? VES / NO Primary Use: AD Expected Audience Event Description: Annval THS Dr. FEES: A \$20.00 non-refundable processing fee must accompany this obtained from the Facility Use Office. Checks shall be made payable to E INSURANCE. Applicants agree by their signature hereto to hold the Bel certificate of insurance with a reputable insurance firm, indicating full injury and property damage. For use of all Performing Arts Centers (P 2.10 and 2.11, outline applicant cancellations and section 7.0 outlines Dist District cancellation procedure include a power curtailment or closure of SCHOOL HOLIDAYS: School facilities are not available for community staffing availability. <u>ABREEMENT</u> : By the signature below, the applicant saffing availability. <u>ABREEMENT</u> : By the signature below, the applicant of the signature below, the applicant cancellations and section 7.0 outlines Dist of the provention of the signature below, the applicant cancellation procedure include a power curtailment or closure of SCHOOL HOLIDAYS: School facilities are not available for community staffing availability. <u>ABREEMENT</u> : By the signature below, the applicant cancellation procedure include a power curtailment or closure of SCHOOL HOLIDAYS: School facilities are not available for community staffing availability. <u>ABREEMENT</u> : By the signature below, the applicant cancellation procedure include a power curtailment or closure of School Holiday and prove the set of the signature below, the applicant cancellation procedure include a power curtailment or closure of the set of the	500 and Procedures 9500 PART 1 - APPLIC Wh Alyssu Bateman Bateman . net DULT / YOUTH e #: 500 Sh Ul and Don application. Facility Schedul Bellevue School District NO. 4 llevue School District NO. 4 llevue School District harmles liability coverage (with the Bi PAC). insurance is required. I trict cancellations. Additiona due to weather. PAC cancella use during school functions cant has read and agrees to	I, 9500.3 and/or 9500.4. ANT INFORMATION School Requested: <u>Int</u> Rooms Needed: (attach list if ne Oytsidd Gym, C Dates: (attach list w/times if in Day(s) of the Week: (circle) M F; 4:00-9 Time Entering Building: Time Leaving Building: Competities as a result of their use. In addit ellevue School District listed as an CANCELLATIONS: School activities cancellation information for PACs tions must be done 30 days in adv or classified/administrative holida the terms and conditions stated	Hake High School ded) Main Gym, Voper Gum, Lac participation of the second se	so be pply a bodily ctions to the ed by when
	ANT SIGNATURE		S DATE: 10-20-11	
Credit Card Payment Information:				
Name on Credit Card:	Credit Card #:		Exp. Date:Verification Code:	
Credit Card Mailing Address:		City:	State:Zip:	
I hereby authorize Bellevue School District to charge my VISA or Master	rCard \$S	ignature:	Date:	
FOR SCHOOL/DISTRICT USE ONLY: PART II - FEES E	STIMATE			
Calendared by School? YES/ NO Calendared by Dis	strict? YES/ ND	CLASSIFICATION 1 2 3	4 Custodian Assigned?	
Non-refundable Application Processing Fee:			CC/Cash 🔲 \$20.00 🗌 POS	
Facility Fee: 🔤 Room(s)	Χ	X \$	X = \$	
# rooms	# hours	rate X \$	#days X = \$	
e ja are desirate reference are a solution. So	# hours	rate	# days	
Supervision: Site School Tech* Other Supervision is required for all PAC events in their entirety + 1 hour	# hours	X \$rate	X = \$ =	
Technician: Type:		X \$	X = \$	
Custodial?: M-F Weekend	# hours	rate per tech X \$ 40	$X = $400^{\circ\circ}$	
?For PAC Minimum 2 hrs. ⁶ Minimum Entire event + 2 hours Debras (anno:6.1)	# hours	rate X \$	# days X = \$	
Other (specify): (i.e., custodial, technical staff, equipment, parkigg)	# hours	ν φ rate	# days 2 2 2 2	
Other (specify): <u>CAPS Fee</u> (i.e., custodial, technical staff, equipment, packing)	# hours	X \$rate	$X = \frac{20}{\# \text{ days}}$	
Special Instructions/ Comments:	# 10015		$\frac{420}{100}$	
Check# Check Amount:-		1	8 [1941] 197 - 1987] 1976 - 1977 - 1977) 1977 - 1977 1986 - 1987 - 1977 - 1977 - 1977 - 1977 - 1978	
School Signature:	S. Kul		_ Date: _//_/	
Facility Use Office Approval:	Waln	n	Date: <u>//-/-</u> Revised 7	/ (

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ORIGINAL-FILE COPY-FACILITIES

Annual IHS Drill and Dance Competition Saturday, February 11th, 2011 Building Request

Room	Usage	
Main Gym w/bleachers set up	Competition	
Upper Gym	Team prep	
Apparatus Room	Team warm up	
Outside Gym	Team dressing/prep	
Both Locker Rooms	Team dressing/prep	
Commons	Concessions and ticket sales	
Staff Lunch Room 1508	Judges luncheon	
Class Rooms	Team dressing/prep	
*All rooms not used by Chinese School		
Parking Lots	Attendees	

Note:

Access to these areas must be available to the team/parents on Friday, February 10th beginning at 5:00 pm until 9:00 pm for competition set up.

Drill Coach:

Alyssa Bateman 425-283-8358 alyssam.bateman@gmail.com

Drill Team Contact:

Mary Ruble 425-641-4432 Mary.ruble@comcast.net