

## BUILDING USE APPLICATION

Bellevue School District 12037 NE 5<sup>th</sup> Street, Bellevue, WA 98005; 425-456-4500

"UCTIONS: PLEASE PRINT. The applicant is to complete PART I <u>ONLY</u>. The facility scheduler will insert all estimated costs based upon the applicant's user classification and armation provided. For further information, refer to Policy 9500 and Procedures 9500.1, 9500.3 and/or 9500.4.

DAPT I	APPLICANT INFORMATION / / / / / / / / / / / / / / / / / / /
Name/Drganization/Department BCHCS FARTT-	School Requested: / intercave #5
Responsible Person: Savina Uzunow	Rooms Needed: (attach list if needed) PAC + commons
Billing Address: 14615 SE 20 th St. Bellevul, WA 98007	Dates: (attach list w/times if more than one day <u>March</u> Z <sup>rod</sup> 20/3
E-mail Address: <u>Uzunow</u> @ gmail.com Daytime Phone: 425-753-0634	Day(s) of the Week: (circle) M T W TH F SA SU
Non-Profit? YES / NO Primary Use: ADULT / YDUT Food Being Served? YES / ND Expected Audience #: 3.5.5	Time Entering Building: 3:00 pm Time Leaving Building 7:00 pm Theater Entrance Time (If differs from above) 3:00 pm Theater Exit Time: (If differs from above) 6:00 pm Performance Start Time 4:00 pm Performance End Time: 5:30 pm
Event Description: Children's Tale	nt show
Use Office. Checks shall be made payable to Bellevue School District NO. 405. Please indicate the name INSURANCE. Applicants agree by their signature hereto to hold the Bellevue School District har insurance with a reputable insurance firm, indicating full liability coverage (with the Bellevue School District Performing Arts Centers (PAC), insurance is required. CANCELLATIONS: School activities ha outlines District cancellations. Additional cancellation information for PACs' is also located in Proced weather. PAC cancellations must be done 30 days in edvance or up to half of the original estimate coulting SCHOOL HOLIDAYS: School facilities are not available for community use during school function	mless as a result of their use. In addition, prior to application approval, users may be required to supply a certificate of strict listed as an additional insured) of at least \$1 million combined single limit bodily injury and property damage. <u>For use of</u> ve preference over community use. Procedure 9500.1, sections 2.10 and 2.11, outline applicant cancellations and section 7.0 dure 9500.4, section 3.0. Exceptions to the District cancellation procedure include a power curtailment or closure due to d be billed.  In or classified/administrative holidays. PAC rental during holiday schedules must be predetermined by staffing availability, and stated above, on the reverse side of this application (or page two when downloading on-line) and Bellevue School District
Cr "t Card Payment Information:	
	Exp. Date: Verification Code:
Name on Credit Card:Credit Card # Credit Card Mailing Address:	
I hereby authorize Bellevue School District to charge my VISA or MasterCard \$	
	Signature: Date:
PART II — FEES ESTIMATE FOR SCHOOL/DISTRICT USE ONLY:  Calendared by School? YES / NO Calendared by District? YES NO  Non-refundable Application Processing Fee:	CLASSIFICATION: 1 2 3 4 Custodian Assigned? YES / NO  CC   Cash   \$20.00   POS
Facility Fee: Performing Arts Center (PAC)*  *Supy is required for all PAC events	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
Technician Other	# hours X \$ 32 X # days = \$ (60 # hours
For PAC Minimum 2 hrs. Minimum Entire event + 2 hours    ther (specify) : : : : : : : : : : : : : : : : : : :	# hours
leason/Session:   Fall   Winter   Spring   Separate Application required for each Season/Session) Special Instructions/ Comments:	# rooms rate TDTAL: = \$
	va Date: 1/29/13
Chaol signature insures coordination with custodial staff for event.	
acility Use Office Approval:	Date:

Interlake Internal Building Use Today's Date Date of Activity Day of Week **Time Requested** Arrive am/pm) 7:00 am/pm **Event** am/pm to am/pm) Nature of Activity Show Number of participants Will there be food served? **Activity Advisor Contact number** Sovina 1/2UNOW Interlake Rental Areas Bleachers out □Library ☐ Main Gym Commons (setup map below) □Outside Gym Theater (fill out district form) □Upper Gym ☐ Career Center ☐ Classroom(s) – please list here (or attach map) Indicate setup here: **Tables** Chairs 60 🗱 ☑You agree to return facility and equipment to original order. Д́PA System ☑Custodial fees will be paid by your club/organization XYou agree to return facility and equipment to original order. ☐ Overhead Projector Advisor Signature 1 □Screen **Building Use Coordinator Signature** Main Gym 1403