

LISBON EXEMPTED VILLAGE SCHOOLS  
317 North Market Street  
LISBON, OH 44432

**STADIUM COMMUNITY ROOM USE APPLICATION**

The Exempted Village School District grants permission for use of school facilities.

Date of Use:	_____		
Name/Organization):	_____		
Enter Time:	_____	Leave Time:	_____
No. Chairs:	_____	No. of Tables:	_____
Other Equipment Needed:	_____		

The above named person(s) and/or organization agrees to accept full responsibility for the use of the building, equipment, and to pay for any damages incurred during the time of use. The person(s) and/or organization will provide the Lisbon Exempted Village School District with a copy of their Liability Insurance Coverage along with this form.

Date: \_\_\_\_\_

\_\_\_\_\_  
Requester's Printed Name

\_\_\_\_\_  
Requester's Signature

\_\_\_\_\_  
Requester's Address

\_\_\_\_\_  
Superintendent

\_\_\_\_\_  
Treasurer

COPIES:       Organization     Treasurer     Superintendent     Caretaker