

# KJSHS AUDITORIUM CHECK-OUT FORM

Purpose of auditorium check-out: \_\_\_\_\_

Dates/times the auditorium will be in use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of actual performance:

\_\_\_\_\_

**Dates that the auditorium will be occupied with props, instruments, etc. and cannot be used by others because of it:**

\_\_\_\_\_

\_\_\_\_\_

The following auditorium facilities/equipment will be needed:

\_\_\_\_\_

\_\_\_\_\_

A light/sound technician will/will not be needed from the high school. If not, name the person(s) in charge of lights/sound: \_\_\_\_\_

Signed by: \_\_\_\_\_

Dates/times the technician will need to be in attendance if needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Auditorium check-out forms need to be requested and approved at least 3 days in advance of auditorium use.** Signing above and/or below states that you agree to accept the auditorium and the equipment in the condition mutually agreed upon by yourself and the manager and understand that it must be returned in the same condition. If damage occurs, you agree to take financial responsibility for needed repairs and/or replacements, and to see that it is reported immediately to either the manager or principal.

**Responsible Party:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Principal:** \_\_\_\_\_

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

## Copies to

- Custodian (x2)
- Maintenance (x1)
- Activities
- Cafeteria
- Band Director
- Other

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