

Panhandle Building Use Permit

| The Impact | FC 2009 Boy | 5 | is hereby | |
|--|---|---|------------|--|
| Name of Organization or Group leasing building | | | | |
| granted permission to use the spaces identified below on the following date | | | | |
| _3/3 be | etween the hours of_ | 6 and 8 | AM/PM | |
| | | | | |
| Rental fee is to be paid at the time of rental unless otherwise waived by district administration. | | | | |
| Rental Fee Waived: | | | | |
| Panhandle Administrative Signature | | | | |
| | | | | |
| The rental fee for the facility is listed in the table below. | | | | |
| and the state of t | Cost Per Additional Hour | Total Hours | Total Cost | |
| Auditorium | \$ 11.47 | | | |
| Cafeteria | \$ 8.06 | | | |
| Lincolnwood Gym | \$ 19.46 | | | |
| Raymond Grade Gym | \$ (9.58) | | 20.00 | |
| Classroom | \$ 2.01 | | | |
| Library | \$ 5.90 | | | |
| Other Space | \$ | | | |
| Additional Services: | | | | |
| Custodial Services | \$20.48 per hour if a custodial is | The custodial fee for the use of the building will be \$20.48 per hour if a custodial is needed during event. | | |
| Cafeteria Services | The cook fee for the use of the building on this date will be \$23.56 per hour if the kitchen will be used. | | | |
| Total Paid | Minimum Charge: \$20.00 | (For first hour of use) | 20,00 | |
| The district athletic director (217.229.4313) is the point of contact for questions regarding the use of the above facility spaces. | | | | |
| The group leasing the building agrees to all rules and customary regulations of the district and agrees to hold the Panhandle Community Unit No. Two District harmless of any claim. A certificate of insurance in the amount of \$1,000,000.00 for property damage and \$500,000.00 for bodily injury may be required. | | | | |
| This agreement mutually entered into on 28th day of Cob, 20_ 0 | | | | |
| | | | | |
| Approved By: Signature of responsible adult representing group. (Minor groups must have adult sponsor before permission is granted to use building.) District Administration Mailing Address, City, State, Zip Mailing Address, City, State, Zip | | | | |
| District Administration Mailing Address, City, State, Zip Wagner #160512 | | | | |
| Date Approved Contact Phone Number Contact Phone Number | | | | |
| Date Approved Contact Phone Number | | | | |

^{*}Times and dates are subject to change due to needs of facility and refund will be given if necessary.