

HOMER HANNA HIGH SCHOOL
FACILITY REQUEST

DATE _____
NAME _____ DEPARTMENT/ROOM# _____
EVENT _____ DATE OF EVENT _____
SETUP TIME _____ BEGINNING TIME _____ ENDING TIME _____
WHO HAS ACCESS FOR SETUP _____

AREA REQUESTED: _____ CAFETERIA
_____ D-106
_____ LIBRARY
_____ BAND HALL
_____ GYM (LARGE/SMALL/AUXILIARY)
_____ SQUAD ROOM
_____ RIFLE RANGE
_____ AIR CONDITIONING
_____ SECURITY - HOW MANY _____
_____ CUSTODIANS - HOW MANY _____
_____ TABLES - HOW MANY _____
_____ CHAIRS - HOW MANY _____
_____ EQUIPMENT (LCD PROJECTOR, SCREEN)
_____ OTHER _____

PLEASE PROVIDE DIAGRAM FOR SEATING/TABLE ARRANGEMENT: