# Berne-Knox-Westerlo Facilities Use Form 2025-2026

Please print and complete the following and return to Melissa Cable in the Elementary school office

Organization requesting use

Name of the person(s) in charge of the requesting organization

Telephone number(s)

Email address

Purpose of facilities use:

Specific facilities needed

Number of participants expected

Additional school equipment requested

Date(s) requested

**If applicable, please submit Certificate of Liability Insurance**

Print name

Signature Date