

**BOOKER T. WASHINGTON SENIOR HIGH
SCHOOL
ACTIVITY/EVENT REQUEST FORM**

Please **PRINT** legibly and submit the form to

Request Date: _____

Organization/Club	
Sponsor	
Contact Information	Room# _____ Ext# _____ Phone Number _____
Type of Event Requested (Describe in detail)	
Event Date, Start & End Time	
Attendance	# of Participants _____ Anticipated Attendance _____
Will Tickets Be Sold?	_____ No _____ Yes (if so, attach Fundraising Activity Form #1018)
Recurrence Pattern	_____ One time _____ Weekly _____ Monthly _____ Other/Specify: _____
Off Campus Event Location (Attach agreement from the facility)	
On Campus Location	____ Auditorium ____ Gymnasium ____ Cafeteria ____ Spill Out ____ Football Field ____ Weight Room ____ Media Center ____ Main Hallway ____ Classroom(s) # _____ ____ Other Specify: _____
Equipment Requested	____ Microphone ____ Projector ____ Chairs (Specify # _____) ____ Music System ____ Tables (Specify # _____) ____ Other Specify: _____
Describe in Detail the Objective of The Event	
How Will It Positively Affect the Student and/or Community	

	Office Use Only
Approval	Activities Director: Yes ____ No ____ Signature: _____ Date: _____ Principal/Designee: Yes ____ No ____ Signature: _____ Date: _____
Reason for Denial	
Comments	

Sponsor Signature: _____
 Date: _____

