

Troy High School

Activities Request Form

(To be returned to APSA Secretary)

Please check the facilities schedule under activities on troyhigh.com to determine the availability of the facility you would like to reserve for your event prior to submitting this form.

would like to reserve for your event pr	for to saomitting tins i	01111.			
Day and Date of Event:**	* Date of Request				
Event or Activity					
Sponsoring Organization:		A	Advisor Name:		
Location:		Event Hours**	From:		То:
Bus Transportation: (Requires Seperate Form) Yes	○ No	Setup:: From		To:	
Guest Pass Required? Yes No Police Supervision: Yes No Serving Food? Yes No Serving Food? Yes No Serving Food Requires special permits Fundraiser: Yes No If Yes, Submit a Profit Potential with this form. If Yes, you are required to pick up a cash box and form. ANY CASH/CHECK TRANSACTIONS MUST BE SUPERVISED BY AN ADVISER. MONEY MUST BE COLLECTED, COUNTED, DOCUMENTED ON THE SALES REPORT AND TURNED INTO THE ACTIVITIES OFFICE BY AN ADVISER.					
THE ADVISER MUST WAIT WHILE THE A					
Overtime custodial fees will be charge charge for services:	ed for events schedule	ed on non-duty	days: Please p	rovide bu	dget number to
** If this event is a non-Troy group, th Saturday events may also require a U			SE OF FACILITI	ES FORM.	
EQUIPMENT NE		¥1.			
PA System Whiteboar	d Screen	Projector	TV/DVD/\	/CR	Bleachers
Computer Risers	Lectern	No. of Tables	N	o. of Cha	rs
Additional Equipment:					
Approvals					
Advisor Signature		SB			
Organization		sst. Principal			
Master Calendar		sst. Principal APSA	A		