

La Habra High School

MASTER CALENDAR REQUEST

*(This request is only for LHHS Staff & Organizations, all others must see
APIO Secretary for Facility Request Form)*

This form needs to be submitted to the APSA at least two weeks prior to the activity. Once approved you will be notified with a copy of this form in your mailbox. For dates and availability, please see Master Calendar on the school website.

Date of this Request: _____ Date(s) of Event: _____

Staff Member Requesting Date: _____

Sponsoring Organization: _____

Event or Activity: _____

Location: _____

Set-Up Hours: From _____ to _____ Event Hours: From _____ to _____

Request to be added to LHHS Website

CHECK EQUIPMENT NEEDED:

PA System	<input type="checkbox"/>	Whiteboard	<input type="checkbox"/>	Risers	<input type="checkbox"/>
No of Chairs	_____	Screen	<input type="checkbox"/>	Bleachers	<input type="checkbox"/>
No of Tables	_____	Overhead Projector	<input type="checkbox"/>	TV/DVD	<input type="checkbox"/>
LCD Projector	<input type="checkbox"/>	Podium	<input type="checkbox"/>	Laptop	<input type="checkbox"/>
Document Camera	<input type="checkbox"/>				

Additional Equipment/Comments: _____

Custodial Needed

**Overtime custodial fees will be charged for events scheduled on non-duty days. Please provide budget number
(Funds Approval Request Form must be turned in along with this activity request form and will need ASB Approval)**

_____ - _____ - _____

*** For Office Use Only ***

For all Athletic Facility Use – Athletic Director Signature: _____ Date: _____

AP Student Affairs: _____ Date: _____

Request: **Approved** **Declined**