

Gonzales ISD Facility Rental Form

Group/Organization:		Contact Person:		
Address:		Address:		
City:	State/Zip:	City:		State/Zip:
Email:		Email:		
Phone: (BUS)	Cell:	Phone: (W)		Cell:
	Organ	ization Category:		
Class A Related School Sponsored Clubs and Organizations	Class B Non-Profit Groups or Organizations (Attach 501-C3 Documentation)	Class C– Organizations and/or Businesses without Non-Profit Status	Class D Fee Basis	Notes
	Camp	ous Requested		
	Gonzales Primary Academy	Gonzales Elementary	Gonzales Junior High	
	East Avenue	North Avenue Intermediate	Gonzales High School	
Reason For the Requested Use of the Facility:				
Facility Requested	Day and Date From	Day and Date To	Time Start/Finish	Estimated Attendance
Apache Field				
Auditorium				
Cafeteria Classroom(s): How Many?				
High School Student Center				
Library				
New Gym				
Old Gym				
Other:				
Total Facility <u>Estimated</u> Cost:				
	Special Set Ups	and Personnel Require	d	
	YES/NO	Start Time	End Time	GISD Use Only
Heating and Air Conditioning Requested or Required	TESHIO	otalt fille	Liid Tillie	GIOD USE OTHY
Custodian Required				
Cafeteria Personnel Required				
Maintenance Personnel Required				
Security Required				
	Appr	oval Signatures		
Group Contact Person	GISD Principal	Athletic Director	Chief Facilities and Operations Officer	Other