



## Coyote Creek Elementary Building Usage Request

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Date(s): \_\_\_\_\_

Event Time: \_\_\_\_\_

Room Needed: \_\_\_\_\_

Equipment Needed: \_\_\_\_\_

Room Set-up: \_\_\_\_\_

\_\_\_\_\_

Approval: \_\_\_\_\_

Gigi Whalen, Principal

Copies to:

Building Engineer

Daycamp

Front Office