

SCHOOL DISTRICT OF UPPER MORELAND TOWNSHIP
REQUEST TO HOLD A CHARITABLE EVENT
(NO MONEY BEING RAISED)

Date of Request: _____

Requesting School: ☐ PS ☐ IS ☐ MS ☐ HS ☐ ADMIN. ☐ NOT APPLICABLE

Name of Requestor And/Or Group sponsoring the Event: _____

Charitable Event: _____

Date(s) of Event: _____ Time(s): _____

Location of Event: _____

Name of Organization benefiting from the Event: _____

Purpose of Charitable Event: _____

☐ If items will be collected and donated to a charitable organization, please list the items here:

☐ If the event involves items being sold "at cost" (with no profits being made) list the items being sold here:

Facilities Usage Requests:

If the activity will take place in a school building or on school district property, an *Application for Use of Facilities* or a *Facilities Support Request form* may need to be completed and approved. All use of facilities must adhere to Board Policy #707. Please contact Dawn Hurt x1501 for the Rules and Regulations for Facilities Usage and the applicable fees (if required).

Insurance Coverage :

Will your event be covered by your organization's insurance policy ☐ Yes (attach copy of policy)
If ☐ No – Please contact the Business Manager to see if the district insurance policy will cover your event.

Building Principal

Requester's Signature

Superintendent