

## RIVER VALLEY SCHOOL DISTRICT

660 West Daley Street

Spring Green, Wisconsin 53588 ≈

742-Exhibit

Phone: 608-588-2551

## Rental/Use of School Equipment Form

ORGANIZATION:	
NAME OF REPRESENTATIVE:	
ADDRESS:	
TELEPHONE #: (HOME)	(WORK)
EQUIPMENT TO BE USED OR REN	NTED:
DATE(S) OF USAGE:	
TIME:	(A.M. OR P.M.)
LOCATION:	
PURPOSE OF USAGE OR RENTAL	<u>:</u>
equipment. The reimbursement shall	Il be determined by the River Valley School Board.
Date Requested	Group Representative or Individual
	Building Principal/Administrative Building Coordinator Approval
Copies of this form to be sent by Buil	Iding Principal/Administrative Building Coordinator to:
<ol> <li>Group Representative or Individu</li> <li>District Administrator</li> </ol>	ual Requesting Use of School Equipment
***************	***************************************
EQUIPMENT DESCRIPTION:	

MODEL #:	
RIVER VALLEY SCHOOL DISTRICT I.D. #: _	

Approved: July 13, 2000 Reviewed: December 9, 2021