

District Use: _____ On Calendar, after approval
 School-Sponsored Sport/Activity After-School Program APTA CLUB/Select Group Rental/Community

2024-2025 Anchorage Independent School District - REQUEST for FACILITY USE Form

Group name: _____ Students, Grade Level _____ Adults

Group Leader(s): _____ Phone: _____ Email: _____

- Facility requested:
- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Auditorium | <input type="checkbox"/> Library | <input type="checkbox"/> Front Lawn |
| <input type="checkbox"/> Large Gym | <input type="checkbox"/> Computer Lab, 216 | <input type="checkbox"/> Outdoor Classroom |
| <input type="checkbox"/> Small Gym | <input type="checkbox"/> Robotics, 217 | <input type="checkbox"/> District/APTA, 101 |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Library Classroom, 218 | <input type="checkbox"/> STEM Lab, 224 |
| <input type="checkbox"/> Sports Field | <input type="checkbox"/> Think Tank, 219 | <input type="checkbox"/> Meeting Room, 117 |
| <input type="checkbox"/> Other: _____ | | |

% of ANCHORAGE RESIDENTS:

PURPOSE: _____
Notifications on All Meeting and Time Changes are the Group Leader's Responsibility

DATES/TIMES: _____

PLEASE MARK ALL DATES INVOLVED IN REQUEST: indicates days school not in session

JULY 2024

SU	M	TU	W	TH	F	SA
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

AUGUST 2024

SU	M	TU	W	TH	F	SA
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

SEPTEMBER 2024

SU	M	TU	W	TH	F	SA
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

OCTOBER 2024

SU	M	TU	W	TH	F	SA
	1	2	3	4	5	
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

NOVEMBER 2024

SU	M	TU	W	TH	F	SA
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

DECEMBER 2024

SU	M	TU	W	TH	F	SA
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JANUARY 2025

SU	M	TU	W	TH	F	SA
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY 2025

SU	M	TU	W	TH	F	SA
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

MARCH 2025

SU	M	TU	W	TH	F	SA
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

APRIL 2025

SU	M	TU	W	TH	F	SA
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

MAY 2025

SU	M	TU	W	TH	F	SA
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

JUNE 2025

SU	M	TU	W	TH	F	SA
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

- Signed Waivers From All Participants Required
- 2 Background Checks Completed for Leaders

PikMyKid Set-Up

Group Added Not Applicable

Requested by: _____
Requesting Group Leader/Sponsor

Approved: _____
Principal or Superintendent

Comments: _____
School Events May Result in Your Requested Time/Date Being Changed