

Master Calendar Request

Rio Americano High School

EVENT:

DATE OF EVENT:

DAY OF WEEK:

ACTUAL EVENT TIME: From



To



TIME: From **Set Up**



Take Down



LOCATION(S) OF EVENT:

NUMBER OF PEOPLE EXPECTED (APPROX.):

PA SYSTEM NEEDED YES NO

WOULD LIKE PUBLICIZED ON SCHOOL WEBSITE CALENDAR YES NO

REQUIRED FOR ALL EVENTS

Name of Contact Person:

Phone Number:



Contact Person E-Mail Address:

Today's Date: .

Revised Date:

APPROVALS completed by Alluria Smith:

_____ Custodial Services- Joe Raya

_____ Principal

_____ Student Government Advisor- Jason Korich

_____ Theater- Jesse Miller

_____ Performing Art Center- Josh Murray

_____ Athletic Director- Gyms/Fields/ P-5/P-6/ cafeteria

===== Brian Ginter (if using PA System)

_____ Library- Laura Woods

_____ Cafeteria Supervisor- for Food Usage

FOR OFFICE USE ONLY

Custodial Services Copy: _____

Date Received _____

Approved _____

Email Sent to POC _____

Civic Permits Calendar: _____

Website Calendar: _____

PLEASE PROVIDE DIAGRAM OF SET-UP

WILL HEAT BE NEEDED: NO YES - From: To:

WILL AIR BE NEEDED: NO YES - From: To:

PODIUM NEEDED:

NUMBER OF TABLES NEEDED:

NUMBER OF CHAIRS NEEDED:

NUMBER OF RISERS NEEDED:

COMMENTS: