

BENJAMIN FRANKLIN ELEMENTARY SCHOOL
Building Usage Request Form
(Internal)

TYPE OF EVENT:
(Name of the Event)

EVENT SPONSORED BY (SCHOOL, PTO, ETC.): PTO

DATE(S) OF EVENT:

TIME OF EVENT:

Set Up Time:

Start Time:

End Time:

LOCATION(S) REQUESTED:
(Example: "All Purpose Room")

PARTICIPANTS:
(Example: Ben Franklin families, students, & staff)

SPECIFIC NEEDS/REQUESTS/EQUIPMENT/NOTES:

EVENT ORGANIZER:

Name:

Position:

Phone:

Email:

Please email completed form to:

mjohnson@ltps.org

galtema@ltps.org