



**FACILITY USE FORM – MAINTENANCE SET UP**  
**(INTERNAL USE ONLY)**

**DATE REQUEST SUBMITTED:** \_\_\_\_\_

NAME OF EVENT: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

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LOCATION OF EVENT: \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_ TIME OF ACTIVITY: \_\_\_\_\_

TIME OF ENTRY: \_\_\_\_\_ TIME OF EXIT: \_\_\_\_\_

ESTIMATED NUMBER OF PARTICIPANTS: \_\_\_\_\_

IS A CUSTODIAN NEEDED FOR EVENT: \_\_\_\_\_ YES \_\_\_\_\_ NO

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**SET UP REQUIRED BY MAINTENANCE**

NUMBER OF TABLES: \_\_\_\_\_ NUMBER OF CHAIRS: \_\_\_\_\_

AUDIO: \_\_\_\_\_ OTHER: \_\_\_\_\_

SET UP INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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DO YOU NEED ACCESS TO THE KITCHEN: \_\_\_\_\_

IS IT ON THE BUILDING CALENDAR: \_\_\_\_\_ YES \_\_\_\_\_ NO

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**Please Email to Cindy Ford in the maintenance department at [cford@armadaschools.org](mailto:cford@armadaschools.org) when completed. If any changes are needed, please communicate them to Cindy as soon as possible.**

**If this form is not received we cannot guarantee your facility will be set up properly or on time. A confirmation will be sent by Cindy to verify she processed your request.**

**DATE RECEIVED BY MAINTENANCE:** \_\_\_\_\_