



FORM F 540-1	
Adopted	September 1, 2009
Last Revised	September 1, 2010
Review Date	May 28, 2014

COMMUNITY USE OF SCHOOLS Permit Request Form

Organization Information		
Sponsoring group/agent/individual:		
Person in charge of event:		
Telephone: Business ()	E-mail address:	
Residence ()		
Mailing address:		
Booking Information		
Category of age of the expected participants(check all that apply): <input type="checkbox"/> children 0-6 <input type="checkbox"/> adults 25-64 <input type="checkbox"/> children 7-12 <input type="checkbox"/> seniors 65+ <input type="checkbox"/> teens 13-18 <input type="checkbox"/> no target age (wide range in the <input type="checkbox"/> young adults 19-24 ages of participants)	Number of participants expected: _____	Gender of participants: <input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> both
Type /name of activity (e.g. Fun Fair, Karate lessons):	Not-for-profit group <input type="checkbox"/> yes <input type="checkbox"/> no	
Category of activity (check all that apply): <input type="checkbox"/> Aboriginal-focused programs <input type="checkbox"/> arts and cultural (e.g. concerts, theatre) <input type="checkbox"/> child care programs <input type="checkbox"/> community services (e.g. job fair) <input type="checkbox"/> educational (e.g. homework club, instructional courses) <input type="checkbox"/> health and wellness (e.g. nutrition, blood donation) <input type="checkbox"/> parenting support (e.g. new parent classes)	<input type="checkbox"/> leadership (e.g. scouts, guides) <input type="checkbox"/> meetings <input type="checkbox"/> social (BBQ, dances, meet and greet) <input type="checkbox"/> sports and recreation <input type="checkbox"/> supports for low income communities <input type="checkbox"/> supports for recent immigrants <input type="checkbox"/> other (please specify): _____	
School requested:		
Days/dates of use:		
Time (include set up time):	Doors open:	Doors close:
Room(s)/grounds requested:		
Equipment needs (please specify, e.g. sports-basketballs; chairs-50): <input type="checkbox"/> sports: _____ <input type="checkbox"/> audio-visual: _____ <input type="checkbox"/> tables: _____ <input type="checkbox"/> chairs: _____	Set up required (e.g. chairs, theatre style, two rows):	
Liability insurance is required for all non-board /community group activities. Do you have insurance? <input type="checkbox"/> Yes (proof of insurance is required with application) <input type="checkbox"/> No (insurance coverage will automatically be included and fee added to permit)		
Signature:	Date:	
Applications must be submitted to the Community Use of Schools office not less than 14 days before the date on which the facility is required. Applicants must be 18 years of age.		
Education Centre 156 Ann Street, Belleville, Ontario K8N 1N9 613-966-1170 x2361/2244 or 1-800-267-4350 x2361/2244 Fax: 613-966-4682 Email: communityuse@hpedsb.on.ca		