

*SC 07.25.24 6 B*

**REQUEST FOR USE OF FACILITIES  
SCHOOL COMMITTEE MEETING  
07/25/24**

1. Requested by Amy Urbowicz/Eddie Bonnell from NETTTS for use of the High School auditorium on Friday 1/17/25 from 5pm-7:30pm.

**Rental Fees - \$50/Hour  
Custodial Fees - \$30/Hour  
Utilities Fee - \$20/Hour  
Security Fee (if needed) - \$25.50/Hour**

2. Requested by Cole Welch from MVPASAP for use of the High School auditorium on Saturday 9/14/24 from 9am-12:30pm.

**Rental Fees - \$50/Hour  
Custodial Fees - \$45/Hour  
Utilities Fee - \$20/Hour  
Security Fee - \$25.50/Hour**

3. Requested by Nate Altimari from Rock Voices Haverhill for use of the High School auditorium on Sunday 8/04/24 from 11am-7pm.

**Rental Fees - \$50/Hour  
Custodial Fees - \$45/Hour  
Utilities Fee - \$20/Hour  
Security Fee - \$25.50/Hour**



Haverhill Public Schools  
Use of Facilities Form

Please Print

Name of Organization: <b>NETTS</b>	Name of Representative: <b>Amy Urbowicz/Eddie Bonnell</b>
Address: <b>1600 Osgood Street, North Andover MA</b>	Phone Number: <b>978-965-2623</b> Email: <b><u>aurbowicz@netts.com</u></b>
Date Requested: <b>Friday January 17, 2025</b>	Arrival Time: <b>5pm</b> Start Time of Event: <b>6pm</b> End Time of Event: <b>7:30 pm</b>

Please check: ☒ Profit Making Group ( ) Non-Profit Group # \_\_\_\_\_

Please check off the location requested and attach list of equipment to be brought into the facility.

Gym	#of Classroom(s)	Cafeteria	Auditorium	Library	Fields	Computer Lab
			✓			

Expected Number of Participants: # **125 - ~~\$70~~** Type of Event: **graduation ceremony**


**To be filled out by HPS facilities only**

Item	Base Fee	Hours	Sub Total	Total	Additional Info
Rental Fee	\$ <b>50</b>	<b>2.5</b>	\$	\$	
Security	\$ <b>25.50</b>	<b>2.5</b>	\$	\$	
Custodial	\$ <b>30</b>	<b>3.5</b>	\$	\$	<i>Custodial staff work 30 minutes before and after event.</i>
Utilities	\$ <b>20</b>	<b>2.5</b>	\$	\$	
Lighting Panel	\$		\$	\$	
Cafeteria	\$		\$	\$	

Signature of Representative _____	Date Requested _____
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Subtotal	
Processing Fee	\$10.00
Balance Due	

Principal Authorization: Approved ( ☒ ) Denied ( )  
School Committee : Approved ( ) Denied ( )

  
\_\_\_\_\_  
Signature of Principal

HPS FACILITIES	PHONE	WEB
4 Summer Street, Room 104, Haverhill, MA	978-374-5725	haverhill-ps.org



1 REVISION



Haverhill Public Schools  
Use of Facilities Form

\* 300 ppl.  
2/14/2024

Please Print

Name of Organization: MVPAP	Name of Representative: Cole P. Welch		
Address: 160 Merrimack Str / Meth	Phone Number: 603 205 4752	Email: c.welch@tsb@gmail	
Date Requested: 7-3-2024	Arrival Time: 9:00	Start Time of Event: 10:00	End Time of Event: 12:30

Please check: ( ) Profit Making Group ( ☒ ) Non-Profit Group # \_\_\_\_\_

Please check off the location requested and attach list of equipment to be brought into the facility.

Gym	#of Classroom(s)	Cafeteria	Auditorium	Library	Fields	Computer Lab
			<input checked="" type="checkbox"/>			

Expected Number of Participants: # 300	Type of Event: Recovery / Guest: Brandon Novak
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To be filled out by HPS facilities only

Item	Base Fee	Hours	Sub Total	Total	Additional Info
Rental Fee	\$ 50	3.5	\$	\$	
Security	\$ 25.50	3.5	\$	\$	
Custodial	\$ 45	4.5	\$	\$	Custodial staff work 30 minutes before and after event.
Utilities	\$ 20	3.5	\$	\$	
Lighting Panel	\$		\$	\$	
Cafeteria	\$		\$	\$	

Signature of Representative	Date Requested
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Subtotal	
Processing Fee	\$10.00
Balance Due	

Principal Authorization: Approved ☒ Denied ( )  
School Committee : Approved ( ) Denied ( )

Signature of Principal

HPS FACILITIES	PHONE	WEB
4 Summer Street, Room 104, Haverhill, MA	978-374-5725	haverhill-ps.org

27 28 29 30 31





Haverhill Public Schools  
Use of Facilities Form

Please Print

<b>Name of Organization:</b> RockVoices Haverhill	<b>Name of Representative:</b> Nate Altimari		
<b>Address:</b> 24 Grave St, South Deerfield, MA 01373	<b>Phone Number:</b> 415-320-7573	<b>Email:</b> capitalregionrockvoices@gmail.com	
<b>Date Requested:</b> Sunday August 4, 2024	<b>Arrival Time:</b> 1:00PM 11AM	<b>Start Time of Event:</b> 5:00PM 4PM	<b>End Time of Event:</b> 8:00PM 7PM

Please check: (X) Profit Making Group ( ) Non-Profit Group # \_\_\_\_\_

Please check off the location requested and attach list of equipment to be brought into the facility.

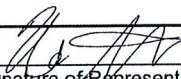
Gym	#of Classroom(s)	Cafeteria	Auditorium	Library	Fields	Computer Lab
	one large - chorus or band		X			

live sound tech and privately owned gear; 4-piece band and their various instruments \*see additional notes attached

Expected Number of Participants: # approximately 40 singers Type of Event: Public Community Chorus Concert

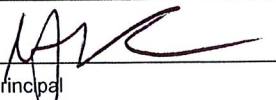
**To be filled out by HPS facilities only**

Item	Base Fee	Hours	Sub Total	Total	Additional Info
Rental Fee	\$ 50	8.0	\$	\$	
Security	\$ 25.50	3.0	\$	\$	
Custodial	\$ 45-	9.0	\$	\$	Custodial staff work 30 minutes before and after event.
Utilities	\$ 20	8.0	\$	\$	
Lighting Panel	\$		\$	\$	
Cafeteria	\$		\$	\$	

	6/14/24
Signature of Representative	Date Requested

Subtotal	
Processing Fee	\$10.00
Balance Due	

Principal Authorization: Approved (✓) Denied ( )  
School Committee : Approved ( ) Denied ( )

  
Signature of Principal

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4 Summer Street, Room 104, Haverhill, MA	978-374-5725	haverhill-ps.org