



# Classroom Use Request Form

**Group Name:** \_\_\_\_\_

**How Many in Group:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Contact Email:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_

**Dates:** *\*please provide 2-3 optional dates*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Preferred Times:** *\*available 8am-9pm*

\_\_\_\_\_

**Facility Use Agreement:** [click here for the document](#)

Yes, I have a current Facility Use Agreement on file within the past 12 months.

No, I do not have a Facility Use Agreement on file and will submit to Maple Valley Fire before securing any reservations.

Submit completed form to [accounting@maplevalleyfire.org](mailto:accounting@maplevalleyfire.org) or fax 425-413-2040. Please allow 3 business days from submitting this form to be contacted with confirmations, thank you.