

**Frisco ISD Nutrition Program
Special Events/After Hours Kitchen Use 2018-2019**

Campus _____ Host Group _____
Date of Event _____ Start Time _____ End Time _____
Type of Event _____ # of people expected _____

Has the principal been informed of after school/weekend use? YES NO

Have you obtained the Temporary Food Establishment Permit? YES NO

This form is required. You are responsible for obtaining this permit from the Health Department. A copy of the permit must be provided with this form.

Facility rental/Custodians must be coordinated through Jean Corzine at 469.633.6502

Number of CNP Employees requested _____ Hours that Access to Kitchen/Employee is needed* _____
Employee will be on site 30 minutes prior to start time and up to 30 minutes after access to kitchen is no longer needed.

At least one CNP employee is required to be present in the kitchen during access times. The charge per employee is \$50.00 per hour with a minimum of three (3) hours. The kitchen must be left clean, with the floor swept and mopped. Failure to do this will result in a \$250.00 clean up fee.

DO YOU NEED THESE ITEMS PROVIDED BY OUR DEPARTMENT? If yes, please indicate what you will need.

Equipment _____
Cooking supplies _____
Food _____
Beverages _____
Paper Products _____
Comments _____

Event Contact

Name _____
Phone Number _____
Email _____

Billing Information

Name/Organization _____
Address _____
Phone _____
Budget code (if applicable) _____

Special Events are invoiced after the conclusion of the event. A deposit of fifty percent (50%) may be required prior to confirming event. An estimate of costs may be provided upon request. Cancellation or changes to food order after order has been placed with vendor may result in penalty or forfeiture of deposit.

Return completed form via email to:
Tammy Lavender
lavendert@friscoisd.org

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