

707-AR-2. APPLICATION FOR USE OF SCHOOL FACILITIES

Name of Organization: _____ Date: _____

Address _____

Nonprofit Organization: Yes _____ No _____ Location Requested: _____ Elementary _____ Middle School _____ High School

Reason for Use: _____

Day(s) Requested: _____ Date(s): _____

Times: _____ to _____ Expected Attendance: _____

Will admission be charged? Yes _____ No _____ If yes, amount: _____

Requirements needed (safety equipment, police, custodial) _____

Please note: If requesting outdoor facilities, please complete two applications - one for fall and one for spring.

Please check facilities needed: *No smoking is allowed in any District Facility*

_____ Gymnasium

_____ Kitchen

_____ Athletic Fields*

_____ Cafeteria

_____ LGI Room

_____ Tables/Chairs*

_____ Stage

_____ Classrooms

_____ Sound Equipment*

_____ Library

_____ Lobby

_____ IT Needs*

_____ Other*

* Specific Needs _____

I have read the rules, administrative regulations, and Board policy on Use of School Facilities. I understand that these are a condition of the lease; and I understand that when the application is properly approved, it is a lease. I understand that failure to abide by these rules, administrative regulations, and Board policy will result in the immediate discontinuance of use privileges. In addition, our organization agrees to pay the full cost of any damage caused by our group to any of the district's facilities, as well as any cost incurred by the district to bring any facility back to the condition in which it was found. Furthermore, my organization forever releases the district, its Board of Education, agents, employees, and servants from all claims, actions, and charges arising out of the event(s) conducted on the above-mentioned day(s) for which this application is being submitted. My organization will defend all actions, suits, complaints, or legal proceedings of any kind brought against the Board of Education and any of its agents, servants, or employees and further will hold harmless and indemnify the said Board and district from any expense and judgements or decrees removed against them as a result of said use of these facilities.

_____ Date _____ Name of Representative/Contact Person _____ Telephone No. _____

Cleared with Master Calendar _____ Date Received _____

Security Needed: _____ YES _____ NO

_____ Building Principal _____ Date _____ Athletic Director _____ Date _____

_____ Supervisor of Building/Grounds _____ Date _____ Supervisor of Food Services _____ Date _____

_____ IT Support _____ Date _____ Business Manager _____ Date _____

_____ Superintendent _____ Date _____ Request Approved _____ Request Denied _____