Use of School Facilities Request Application

Individual or Organization Name: ________________________________

Address: ________________________________________________________________

Telephone: ___________________ Fax: ________________________________

Representative’s Name: ________________________________________________

Address: ________________________________________________________________

Telephone: ___________________ Fax: ________________________________

Date(s) of Event: _________________________________________________________

Time Schedule of Event: ___________________________________________________

Description of Event: ______________________________________________________
________________________________________________________________________

Sections of Buildings or Grounds to be used:
________________________________________________________________________
________________________________________________________________________

Furniture and/or equipment needed (Tables/chairs, etc.) please itemize:
________________________________________________________________________
________________________________________________________________________
It is understood that the facility user applicant has read, understands and will comply with Joint Operating Committee Policy 707: Use of School Facilities

Please Note:

- The school shall be held harmless by the user for any liability that arises from use of facilities by the individual or group.

- The approved user shall be financially liable for damages to the facilities.

- Non-school related applicants must provide a Certificate of Insurance as evidence of organizational liability with limits required by school guidelines with the school as an additional named insured.

- The approved user is responsible for setting up, moving, dismantling, and returning furniture, equipment, and supplies to their proper place.

- The approved user is responsible for performing all custodial chores necessary to restore the facility and furniture to the condition in which it was found. Payroll costs will be billed to the approved user for any additional services required by school employees for such chores.

**Fee Schedule**

<table>
<thead>
<tr>
<th></th>
<th>School-related groups</th>
<th>Individuals and Non-profit organizations</th>
<th>For Profit organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom</td>
<td>No Charge</td>
<td>$25/hour</td>
<td>$50/hour</td>
</tr>
<tr>
<td>Cafeteria</td>
<td>No Charge</td>
<td>$40/hour</td>
<td>$80/hour</td>
</tr>
<tr>
<td>Corridor</td>
<td>No Charge</td>
<td>$10/hour</td>
<td>$20/hour</td>
</tr>
<tr>
<td>Kitchen</td>
<td>No Charge</td>
<td>$40/hour</td>
<td>$80/hour</td>
</tr>
<tr>
<td>Laboratory</td>
<td>No Charge</td>
<td>$40/hour</td>
<td>$80/hour</td>
</tr>
<tr>
<td>Grounds</td>
<td>No Charge</td>
<td>$25/hour</td>
<td>$50/hour</td>
</tr>
<tr>
<td>School employee payroll costs</td>
<td>No Charge</td>
<td>Actual cost</td>
<td>Actual cost</td>
</tr>
</tbody>
</table>
| Liability Insurance Certificate | N/A                  | Limit $1,000,000                      | Limit $1,000,000         

Other Charges: ___________________________________________________________

**Applicant’s Signature:** _______________________________ **Date:** ____________
Use of School Facilities Request Application:  Approved_______ Denied: _______

**Total Estimated* Amount Due:** _____________________________________________

*Actual amount will be invoiced after the event and payment is due within 30 days of the invoice date

Facilities Manager's Signature: _______________________________ Date:_________

Joint Operating Committee approval date (if required)___________________