

APPLICATION FOR USE OF PUBLIC SCHOOL BUILDING(S)

North Schuylkill School District, Ashland, PA 17921-9301

(Revised 1-28-11)

TO: (1) _____ Building Principal: Referred to: (2) Superintendent: (3) Board of Education

FROM: _____
(Name of Applicant-Organization) (Address of Applicant's Officer) Telephone No. Date Submitted

DESCRIPTION OF FACILITY, AREA AND/OR EQUIPMENT AND TIMES--DATES REQUESTED

<u>BUILDING</u>	<u>ROOM/AREA</u>	<u>DAYS</u>							<u>DATES OF USE</u>	<u>TIMES OF USE</u>	<u>SPECIAL SCHOOL EQUIPMENT REQUESTED</u>	<u>NAME OF SUPERVISOR:</u>
		<u>S</u>	<u>M</u>	<u>T</u>	<u>W</u>	<u>T</u>	<u>F</u>	<u>S</u>				
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____

User holds the school district harmless from all claims for injury to or the death of any person, and for damage to or the loss of any property arising out of or attributed directly or indirectly to the operations or omissions of the school district. User indemnifies the school district for all damage to property belonging to the school district and for all injuries to or the deaths of any representative or employees of the school district resulting from all acts or omissions of user.

DESCRIPTION OF INTENDED USE

Describe briefly the intended use - program _____
List Admission - Participation Charges - Fees - Donation, if any: Adults \$ _____ ; Children \$ _____ ; Others \$ _____
For what purpose (s) will proceeds be used _____
Will your organization have adequate insurance coverage for all persons using the requested facility _____

A COPY OF THE LIABILITY INSURANCE IN THE AMOUNT OF \$252,000 MUST ACCOMPANY THIS BUILDING REQUEST (School Board Policy No. 40)

- 1. Contingent with who is going to open and close the building.**
- 2. Updated liability insurance on file which states North Schuylkill School District.**
- 3. Must cooperate with other building activities.**

ORGANIZATION INFORMATION

<u>ORGANIZATION OFFICERS</u>	<u>ADDRESS</u>
President-Chairman _____	_____
Secretary _____	_____
Treasurer _____	_____

The Applicant's authorized officer hereby certifies that the organization agrees to comply with and enforce the Regulations of USE OF SCHOOL FACILITIES adopted by the board of Education and further agrees to promptly pay for ALL personal and/or property damages occurring as a direct result of this Application.

Authorized Signature of Organization _____ Athletic Director _____
Director of Buildings and Grounds _____ Building Principal _____

Date _____