

DOLORES SCHOOL DISTRICT RE-4A
Facility Use Agreement

Today's Date: _____

Name of group or organization _____

Name of Representative: _____

Email of group contact (required): _____

Explanation of activity: _____

Begin Date of Activity: _____ End Date of Activity: _____

Begin Time of Activity: _____ End Time of Activity: _____

Days Needed: ____ Sun. ____ Mon. ____ Tues. ____ Wed. ____ Thurs. ____ Fri. ____ Sat.

Complete the following:

1. District Office approval (out of district groups): _____ Date: _____
2. Outside Group Insurance (Y/N): _____ (If yes, please attach)
3. Request building site and obtain signatures from the following:

Library approval: _____ Date: _____

Elementary Approval: _____ Date: _____

Athletic Director Approval: _____ Date: _____

Maintenance Director: _____ Date: _____
 (see next page for details)

Technology sign-off: _____ Date: _____
 (See Next Page for details)

Final Approval by: _____
Building Principal or Dean *Date*

Facility requested and Category for Payment:

	<u>Category 1</u>	<u>Category 2</u>	<u>Category 3</u>
Deposit Required	No Deposit	\$100.00	\$100.00
<u>User Fees:</u>			
Classroom	N/C	N/C	\$ 20.00
Elementary Gym	N/C	N/C	\$ 75.00
Aux Gym	N/C	N/C	\$100.00
Main Gym	NC	NC	\$100.00
Board room	N/C	N/C	\$100.00
Commons	N/C	N/C	\$100.00

*Organization Category:	___ Category One	___ Category Two	___ Category Three
*Proof of Insurance:	___ None needed	___ Current Policy on file	___ Attached

*** See the last page for an explanation of the categories**

As a representative of the group above, I understand and accept responsibility for the following:

1. Only the above group will use the facility during the assigned time.
2. The facility will be kept in good condition and left clean and orderly.
3. All children will be supervised at all times while on school property.
4. Doors will be locked when the above group leaves.
5. The school will not be responsible for any loss and/or injury that might occur.
6. The keys will be used only by the representative whose signature appears on this form and will be returned to the district office as soon as possible after the activity is over.
7. A deposit may be required.
8. Our campus is smoke-free and drug-free.
9. Individuals, groups, and organizations must prove satisfactory liability insurance protection before using school facilities. (District Office Sign Off)
10. The Facility Use Agreement form will be completed and submitted to the Secondary Office for final approval.

Signature of Representative

Printed Name of Representative

phone

Please check the following if applicable:

Specific Needs:

- Audio/Visual Equipment-list below (copy to Technology Director)
 - _____
 - _____
 - _____
 - Key Card for entry (Y/N) _____
 - _____
- Should a custodian be required for set up/ clean up a \$50.00 per hour cost will be paid to the district, then dispersed to the custodian. Yes No

If Yes:

Specific Setup (# chairs/tables/configuration etc.)

(Attach diagram copy to Maintenance Director)

When using Dolores School District facilities and NOT paying for a custodian, you are responsible for all cleaning and cleaning supplies.

Cleaning – Facility users are responsible for the following even when paying for a custodian:

- Wiping down all tables/desks used.
- Removing trash and garbage to the dumpster and replacing trash bags.
- Check restrooms, flush toilets, and ensure no paper towels have been stuffed in toilets or left in sinks.
- Floors swept and mopped.
- All cleaning supplies were returned to their proper place
- _____ Initials

Security:

No unauthorized persons are allowed in the school buildings. Facility users are responsible for keeping unauthorized students and others out of the facility. Facility users are responsible for the actions of all students and others while using the facility. Any damage or theft that occurs will be charged to the facility user.

Lights were turned off

All windows and doors were locked

The facility was left clean

Are there any issues with the facility's usage? If so, please describe:

Signature of Responsible Party: _____

Signature of School District Representative: _____

Rental categories:

Category 1

No rental fee shall be charged to the following:

- School-affiliated groups such as parent-teacher organizations, school-related parent and community groups, or employee groups of an educational, recreational, social, or professional nature as approved by the building Principal.
- Governmental entities use facilities as polling places.

Precinct caucuses.

Category 2

The following groups will be required to pay a security deposit for each after-hours use application. A security deposit is not necessary if activities occur during regular supervisory hours.

- Community-sponsored groups that do not charge a fee and whose primary purpose is to hold informative meetings open to the public (such as the League of Women Voters, political parties, local neighborhood organizations, and recognized community service groups).
- Community-sponsored youth and senior citizen activities when:

Instructors or supervisors receive no payment for their involvement in that activity.

Fees for the activity, if any, are provided only for direct non-personnel costs.

Category 3

- Commercial, private, church and other non-profit groups that do not meet the criteria in Category 2 and for-profit groups and individuals may rent school facilities when their use is not incompatible with Board policy. **Users of the facilities will pay fees and provide necessary proof of insurance in advance of the activity.**

A \$100.00 deposit is required for Category 2 & 3 users. The deposit will be returned after a cleaning/damage inspection, and the facility will be clean and undamaged. If the deposit covers the extent of the damage, the excess will be billed, and further usage of facilities will be allowed until payment is received.

The security deposit will not be refunded if the used facility needs to be cleaned. If the user requests a custodian in advance, the custodian rate will be \$50.00/hr. For each custodian, with a minimum charge of one hour.

For District and Office Use Only:

_____ The date is cleared on the master calendar _____

_____ A confirmation email is sent to the party requesting facility use _____

_____ A copy of the Cleaning Checklist is included in the confirmation email.

_____ Master Event Calendar (Y/N): _____ Completed: _____ Date: _____

_____ Facility Use Calendar date available (Y/N): _____ Completed: _____ Date: _____

Signed: _____ **Date:** _____

Key returned and deposit refunded: _____ *Date:* _____