## FLOWING WELLS SCHOOLS

## Requisition for Use of District Facilities or Equipment

- 1. Fill out this three-part form completely and return it to the Site Building Administrator. Separate forms are required for each facility use. A new request must be submitted annually, before June 30<sup>th</sup>.
- 2. Submit your request at least two weeks in advance; sooner, if you wish to insure availability.
- 3. Approved copies of this form will be signed and returned to the Building Administrator and the Rental Party. The signed copy shall comprise your reservation for use. Each request must be approved by the Governing Board.

Name of Rental Party:		
Responsible Individual:		
Address:	Zip:	
Telephone:	Date:	
Email Address:		
Date(s)/Time(s) Requested:		
School Facility Requested (be specific):		
School Equipment Requested (be specific):		
Purpose of Request:		
Number of Participants/Spectators Expected:		

Copy 1: Business Office Copy 2: Building Administrator Copy 3: Rental Party

9-FW30210

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I hereby agree to assume full personal responsibility for the stated District facility and/or equipment and guarantee that the facility and/or equipment will be left in the same condition as when obtained. This responsibility includes removal of any litter created, use of appropriate non-marking footwear in gyms, lights, A/C, and evaporative coolers turned off, and the facility properly secured at the end of the activity. I also understand and agree to abide by the District non-smoking policy.

Facility use is granted only for those specific dates and times which are shown and approved on the first page of this form. Deviations from the approved schedule will be allowed with specific District approval and may be initiated based on District needs as they occur. At all times, school functions and activities will take priority over all District Facility Use Agreements.

The responsible person at any activity must have a copy of this form in his/her possession at all times. The copy should be presented to any Flowing Wells District employee who requests proof of your authorization. I affirm that our organization is \( \subseteq \) is not \( \subseteq \) a religious or political body and that it does not restrict its membership in any way whatsoever due to race, color, creed, sex, religion, national origin, or handicap. I also agree to hold the District harmless from any liability due to use of the school facilities and to furnish proper insurance as required by the District and State law. A CERTIFICATE OF LIABILITY INSURANCE FILLED IN BY AN INSURANCE AGENT MUST BE ATTACHED. This insurance shall provide the minimum limit of \$1,000,000 for bodily injury and property damage and names the district as additional insured. In the event the District employs an attorney to enforce any of the provisions of this agreement by court action or otherwise, the District shall be entitled to recover from the rental party any attorney's costs reasonably incurred by the district. I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS AND ATTEST THAT ALL INFORMATION GIVEN BY ME IS TRUE AND COMPLETE. I FURTHER UNDERSTAND THAT FAILURE TO ABIDE BY THESE PROVISIONS WILL RESULT IN ADDITIONAL CHARGES BY THE DISTRICT TO CORRECT SUCH FAILURES. ALSO, SUCH FAILURE WILL JEOPARDIZE FUTURE **USE OF DISTRICT FACILITIES.** Charge (Refer to Rental Chart): Community For Profit Extension Programs Facility Fee: \$ \_\_\_\_\_ Custodial Fee: \$ \_\_\_\_\_ Utilities Fee: \$ \_\_\_\_\_ Equipment Fee: \$ \_\_\_\_\_ Actual Wages for Staff: \$\_\_\_\_\_Other: \$\_\_\_\_\_ Estimated Total: \$ Signature of Building Administrator: \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ Approved Signature of District Representative: \_\_\_\_\_ Date: \_\_\_\_\_ Approved \_\_\_\_ Disapproved Payment received by: Date:

<sup>\*\*</sup>ONLY DISTRICT-SPONSORED EVENTS WILL BE FREE OF CHARGE – ALL OTHER RENTALS WILL HAVE A FEE\*\*