

**Community Relations**

**Exhibit - Application and Procedures for Use of School Facilities**

*To be submitted to the Superintendent*

**This application must be approved before a non-school related group is allowed to use school facilities.** School organizations, school-sponsored programs, and organizations whose primary purpose is to provide financial assistance to the school are all considered, for the purpose of this application, to be school-related.

<b>Organization name</b>	<b>School facility</b>
<b>Program/Activity</b>	<b>Program/Activity dates</b>
<b>Equipment needed</b>	<b>Materials to be brought into facility</b>
<b>Room arrangement, including decorations</b>	<b>Food service required</b>

**1. All non-school related groups must supply adequate supervision to ensure proper care and use of school facilities.**

- Only the cafeteria, auditorium, gymnasium, and athletic field, along with needed hallways and parking areas, are available for community use.
- No furniture or equipment may be moved without prior approval from the Building Principal.
- Signs, displays, or materials may not be attached, nailed, or otherwise affixed to walls.

\_\_\_\_\_ *Initial here if this is agreeable*

**2. All non-school related groups must agree to:**

- Indemnify and hold harmless the District and its agents and employees for and from any and all loss including attorneys' fees, damages, expense, and liability arising out of its use of school property.
- Pay any damages to school facilities, furniture, or equipment arising out of its use of school property whether such damage was accidental or deliberate. The cost of damages will be based on the repair or replacement cost, the choice of which is at the School Board's discretion.
- Supply proof of insurance verifying that the group maintains adequate insurance coverage against personal injury and/or property loss: \_\_\_\_\_

Insurance provider name and contact number

\_\_\_\_\_ *Initial here if this is agreeable*

**3. All non-school related groups must pay the following fees:**

Rental charge (unless waived by Board policy): \_\_\_\_\_

Meal and beverage service (cost as determined by the cafeteria supervisor): \_\_\_\_\_

\_\_\_\_\_ *Initial here if this is agreeable*

**4. The use of school facilities for school purposes has precedence over all other uses.**

\_\_\_\_\_ *Initial here if this is agreeable*

**5. All non-school related groups must agree to use appropriate emergency procedures including calling 9-1-1 for medical emergencies and whenever an AED is used.**

\_\_\_\_\_ *Initial here if this is agreeable*

**6. All non-school related groups must agree to follow the District's Plan for Responding to a Medical Emergency at an Indoor Physical Fitness Facility, 4:170-AP6.** Important: the District will not supervise the activity nor will it supply individuals to act as emergency responders.

Activity being proposed is not in an indoor physical fitness facility.

\_\_\_\_\_Initial here if this is agreeable

**7. If the request involves an indoor physical fitness facility, the non-school related group must:**

- Designate at least one adult who agrees to be an emergency responder. If possible, all emergency responders should be trained CPR and AED users.
- Give a copy of the District's plan for responding to medical emergencies to each designated emergency responder.
- Require that 9-1-1 be called for medical emergencies and whenever an AED is used.
- Ensure that each designated emergency responder knows the location of first aid equipment and any AED.
- Ensure that only trained AED users operate an AED, unless the circumstances do not allow time for a trained AED user to arrive.
- Arrange for at least one emergency responder to have a tour of the facility before the activity.
- Ensure that if an AED is used, all appropriate forms are completed (4:170-E6, *Automatic External Defibrillator Incident Report*).

\_\_\_\_\_Initial here if this is agreeable

**I agree to abide by the conditions stated in this application and agree to adhere to all Board policies and administrative procedures.**

_____	_____
Applicant name ( <i>please print</i> )	Telephone number
_____	
Address	
_____	_____
Applicant signature	Date

The Superintendent or designee will base his or her decision on the information being provided in this application as well as other criteria deemed important. (*Note to Superintendent or designee: after approving or denying this application, return a copy of it to the person making the request, keep the original in the central office, and send a copy to the appropriate Building Principal.*)

**Approved**       **Denied**

_____	_____
Superintendent or designee	Date