

## SAN MIGUEL JOINT UNION SCHOOL DISTRICT APPLICATION AND PERMIT TO USE PUBLIC FACILITIES

Approved:	
Supt	___
Business	___
MOT	___
Café	___
LLE Gym	___
Calendar	___
Copy to Appl.	___

**Note:** This application must be filed two weeks prior to date facilities are desired. Premises must be vacated promptly at the time indicated. A copy of this application will be returned to the applicant when approved.

**Name of Organization:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Facility/Equipment Requested:** \_\_\_\_\_ **Date of Event:** \_\_\_\_\_

**Purpose:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Size of Group:** \_\_\_\_\_ **Open to Public:** \_\_\_\_\_ **Admission Charge:** \_\_\_\_\_

**Oaths:** I do hereby certify that the facts stated in the foregoing are true of my own knowledge. The school property sought to be used hereto in the application is not to be used for the commission of any act intended to further any program or movement the purpose of which is to accomplish the overthrow of the government by force, violence or other unlawful means. Further, in compliance with federal and state laws and District Board of Education Policy, I certify that the above named organization upholds the State and Federal Constitution and prohibits discrimination based on race, sex, color, religion, age, handicap, ancestry, or national origin.

**Insurance:** Non-free use applicants hereby agree to provide the San Miguel Joint Union School District with a certificate of insurance for at least one million dollars.

**Hold Harmless:** Applicant agrees to hold the San Miguel Joint Union School District, their Board of Trustees, the individual members thereof, and all District officers, agents, and employees free and harmless from loss, damage, or liability resulting from negligence of applicant using facility. Further, the organization or group you represent shall assume full responsibility for adequate care and protection of the school property involved under this request, and will reimburse the District in full for any damage or loss, which might occur.

\_\_\_\_\_  
**Print Name & Title** \_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Site Administrator's Signature** \_\_\_\_\_  
**Date**

### DISTRICT USE ONLY

This request is classified as:      Free Use \_\_\_\_\_      Direct Cost \_\_\_\_\_      Fair Rental \_\_\_\_\_

Certificate of Insurance Received: \_\_\_\_\_

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**Direct Cost Rates:**

\$100.00 Refundable Cleaning Deposit

After hour custodial: \_\_\_\_\_ (\$25.00 per hour)

Utilities: \_\_\_\_\_ (Classroom \$5.00/hour; M/P-Cafeteria, Kitchen or Gym \$12.00/hour)

Fair Rental Rates	# of Hours	Estimated Costs	Actual Costs	Difference (+/-)
Classroom Rental = \$15.00 per hour	x _____	= _____	_____	_____
Multipurpose Room = \$50.00 per hour	x _____	= _____	_____	_____
Gym (Mon – Fri) = \$25.00 per hour	x _____	= _____	_____	_____
Gym (Sat – Sun) = \$40.00 per hour	x _____	= _____	_____	_____
Custodial = \$25.00 per hour	x _____	= _____	_____	_____
\$100.00 Refundable Cleaning Deposit		= _____	_____	<b>TOTAL usage fee</b>
Weekend/After Hours Staff Fee \$100.00		= _____	_____	_____
District Approval: _____		Date: _____		