

**KEMP INDEPENDENT SCHOOL DISTRICT
BUILDING USE REQUEST FORM**

School activities, school-sponsored activities, and school-related activities, in that order, shall have priority use of school facilities and shall not be charged rental fees. Requests from other groups shall be granted on a first-come, first-served basis. The District shall not permit use of its facilities for financial gain. Signature on this form indicates receipt and understanding of district policy and regulations related to use of the facility, and acknowledgement that the District is not liable for any personal injury or damages to personal property.

Use of school buildings and properties on a "no fee" basis shall be limited to:

1. All school-sponsored and school-endorsed clubs and groups.
2. City, school, county, state, and national elections.

Name of group or organization requesting use of the District Building/Facilities:

Please explain the purpose for which the building will be used:

Date (or consecutive dates)	Day of Week	Begin & End Times	Total Hours	Hourly Cost (\$7/hr. - \$28 min.) Round up to nearest hour
Additional Charges: Flat fee of \$25 per day x _____ Plus \$15 Administrative Cost				\$
<input type="checkbox"/> No fee basis			Total Estimated Cost:	\$

Rental fee must be paid at time of reservation. Dates will not be held without this completed form, payment of rental fee in full, and a separate deposit of \$200.00. Full deposit will be forfeited if facility is damaged or requires cleaning. Cancellation: The full amount will be refunded if cancelled at least 10 days prior to scheduled rental.

Renters must hire a current employee of Kemp ISD to open, be present during the activity, and lock/secure the building. This school employee will also ensure that the responsible party has cleaned the facility and all trash taken to the dumpster. These arrangements are to be made by the above named organization. (Please read "To the Employee" below.) Name and signature of school employee required.

Employee Name

Employee Contact #

Campus/Department

To the employee of Kemp ISD: If you do not have a key to the facility, you must check out the key in advance from the Campus/District office during office hours. The key must be returned to

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the Campus/District office on the first business morning following the event. Your signature below indicates that you accept the responsibility for the security of the facility and to be present during the rental period. You are not responsible for cleaning services unless such arrangement is made between you and the rental party; however, you are responsible for insuring that the facility is left clean and free from damage. All payment/compensation arrangements for your services are between you and the rental party.

Signature of KISD Employee: _____

Date: _____

Rental request submitted by: _____

Name: _____

Address: _____

Phone #: _____

I have received a copy of Kemp ISD policy GKD(LOCAL).

Signature: _____

Return form and payment to: Kemp ISD 905 South Main St. Kemp, TX 75143
Phone: 903-498-1312 Fax: 903-498-1370

OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">Primary Principal, Jennifer Welch</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">Intermediate Principal, Kim McDowell - Stewart</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">Junior High Principal, Kyle Hutchings</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">High School Principal, Jim Lamb</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">Athletic Director, Lee Wilkins</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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OFFICE USE ONLY The facility has been reserved on the dates and times requested: Approved: _____ District Administrator: _____ <p style="text-align: center;">Superintendent, Dr. Lisa Gonzales</p>	PAYMENT INFO: Disapproved: _____ Date: _____
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