

Snowline Joint Unified School District Application for Use of Facilities

(Certificate of Liability Insurance and Completed Application Forms must be turned in 2 weeks prior to requested date)

Organization/Group:			Today's Date:		
School Site Requested:					
Facilities Requested:					
Date(s) Requested	From:	To:	Time(s) Requested	From:	To:
Program/Event Title:				Expected Attendance:	
There will be an admission charge or collection:			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Use is open and non-exclusive:			Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Equipment Requested:

- Sound System
 Microphones #: _____
 Chairs #: _____
 Tables #: _____
 Podium
 Overhead Projector
 Parking Lot Lights
 Heat/AC
 School Lights
 Sprinklers Off
 Alarm Off
 Doors Unlocked
 Restrooms Unlocked
 Tarps Down
 Security
 Kitchen/Cafeteria
 Custodial Set-up
 Custodial Clean-up
 Other: _____

Required Certification:

- Applicant hereby agrees to hold the Snowline Joint Unified School District, its Board of Trustees, the individual members thereof, and all District Officers, agents and employees, free and harmless from such loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of school property. Applicant further states that he/she has read the rules and regulations regarding this application and agrees to abide by and enforce same.
- The undersigned states to the best of his/her knowledge, the organization on whose behalf he/she is making application for school property does not advocate, and the school property for use of which this application is hereby made will not 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 of the United States or of the State of California by force, violence or other unlawful means, and that to the best of his/her knowledge, is not a communist-action organization or communist-front organization required by law to be registered with Attorney General of the United States. This statement is made under the penalty of perjury.
- Applicant will be required to submit a certificate of Liability Insurance pursuant to Administration Regulations 1330(g) as a condition of approval no later than two (2) weeks prior to date of the event.

Print Name:	Complete Mailing Address:	
Email:	Confirm Email Address:	
Signature:	Date:	Phone Number:

Office Use Only

Facilities Manager:	Date:	Principal:	Date:
Custodial Supervisor:	Date:	District Office:	Date:
Custodian(s) Assigned to Event:			
Certificate of Liability Insurance Received	Date:	Expiration Date:	Risk Mgmt.:

Employee or Facility	Rate/Hour	Actual Time Used
Total Cost: \$		

Field Use

Extra Time Sheet

Work Order # _____