



Initial Request

Revised Request

Date Submitted: \_\_\_\_\_

## FACILITY AND EQUIPMENT USE APPLICATION

### MUST BE COMPLETED BY APPLICANT

The undersigned, hereby makes APPLICATION to USE \_\_\_\_\_ school/facility

on behalf of: NAME OF ORGANIZATION OR INDIVIDUAL: \_\_\_\_\_ for,

DESCRIBE ACTIVITY:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE: (if one day only) \_\_\_\_\_ DAY(S) OF THE WEEK: \_\_\_\_\_

If Continuous, BEGINNING DATE: \_\_\_\_\_ ENDING DATE: \_\_\_\_\_

HOURS: \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM

APPROXIMATE # OF PARTICIPANTS PER DAY: Total \_\_\_\_\_

ACTIVITY IS FOR:  SWSD#2 STUDENTS  SWSD#2 EMPLOYEES  OPEN TO PUBLIC

Sweetwater County School District #2 reserves the right to require the applicant to provide liability insurance coverage. Applicant has current liability coverage?  Yes  No

### SPECIAL NEEDS/ITEMS REQUESTED

KITCHEN EQUIPMENT\* (Nutritional Services Only) \_\_\_\_\_

EQUIPMENT\* (av, Scoreboard, Technology etc.) \_\_\_\_\_

AQUATICS FACILITY\* \_\_\_\_\_

OTHER \_\_\_\_\_

### SUPERVISOR AND BILLING INFORMATION

SUPERVISOR NAME: \_\_\_\_\_ Email \_\_\_\_\_

CELL PHONE \_\_\_\_\_

CHARGES (If Applicable) FOR FACILITY USE WILL BE PAID BY:

NAME: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

CITY \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**TERMS AND CONDITIONS**

- 1. I agree to be responsible for the conduct of the participants and spectators in and about the building and for any damage beyond ordinary wear and tear which may occur to school property due to my occupancy and/or uses thereof; and I also hereby agree to defend, indemnify, and hold harmless Sweetwater County School District #2 from any and all claims, loss, cost, or damage rising out of the use of the facility covered by this application; and I further agree that the school property will be used in accordance with rules and regulations of the Sweetwater County School District #2 Board of Trustees and Administrators. Smoking, or use of any e-cigarettes and vapor products—regardless of the substance, drugs, alcohol, or any/all tobacco products is prohibited on all Sweetwater County School District #2 property including buildings and outdoor areas. The applicant agrees to adhere to Federal and State OSHA Standards on Blood borne Pathogens.
- 2. Sweetwater County School District #2 requires organizations/groups to submit a Certificate of Insurance verifying \$2,000,000 of liability insurance coverage with Sweetwater County School District #2 named as additionally insured. **A copy of this Certificate must be on file in the District Activities Office prior to using any facility.**
- 3. if the building/facility is not to be used on the date requested, the school building and/or Activities Office must be notified at least 24 hours prior to the event. **FAILURE TO PROVIDE 24 HOURS NOTIFICATION OF CANCELLATION WILL RESULT IN A MINIMUM TWO-HOUR CUSTODIAL CHARGE.**
- 4. Initial fee estimates are subject to change (+/-) after usage has occurred. Failure to pay all charges in full will result in denial of future facility usage.
- 5. A fee may be charged for field, building, parking lot, or other facility clean-up that is required above and beyond this agreement.
- 6. The District reserves the right to reject any and all requests and to charge an appropriate facility fee if it so deems.
- 7. The applicant is responsible for the supervision of those attending the approved event and is liable for any mishaps that occur. Persons not directly connected with the event are not to be on District property. No alcohol, controlled substances, tobacco, or vapor products of any kind will be allowed on District premises. Any food sold must meet District Wellness Guidelines.
- 8. Keys/Key Cards to District facilities will not be given to applicants without prior approval. Permission must be obtained to decorate rooms, move furniture, or to store items on premises.
- 9. Specific rules and regulations may be imposed to ensure the safeguarding of District property.

\_\_\_\_\_  
**Signature of Authorized Representative/Sponsor/Supervisor (Required)** \_\_\_\_\_  
Date

**MUST BE COMPLETED BY SCHOOL/DISTRICT**

**The following must be completed prior to submitting application to Required Departmental Offices:**

- Completed Application is signed by applicant
- Fee Schedule Worksheet is complete

The school/district reserves the right to cancel this permission at any time.

**APPROVED**       **DENIED**

**Total charges per FEE Schedule Worksheet**

\$ \_\_\_\_\_

\_\_\_\_\_  
**Signature of Building Principal (Required)**

\_\_\_\_\_  
**Signature of Activities Director (Required)**

*Hard Copy Distribution: 1. Activities Office retains a copy 2. Provide copy to Maintenance/Building Custodians 3. Provide copy to Building/Facility 4. Technology Department. 5. Provide a copy to Applicant.*

**FEE SCHEDULE WORKSHEET C**  
(to be completed by maintenance director)

Complete the following worksheet. See Tiered guidelines to determine which groups are charged fees.

**Building Fees**

	Days of use		Hours of use		Fee Per Hour	=	Total Cost
High School		X		X	30.00	=	
Middle School		X		X	25.00	=	
Elementary School		X		X	20.00	=	

**Specialty Electricity (Lighting) Fees**

	Days of Use		Hours of Use		Fee Per Hour	=	Total Cost
Field Lights		X		X	30.00	=	

**Other Fees**

**Equipment Usage (i.e.: Kitchen ovens/stoves; computers; A/V Systems etc.)**

Number of equipment items		Hours of Use		Fee Per Hour	=	Total Cost
	X		X	20.00	=	

Labor Costs		Total Hours		Fee Per Hour	=	Total Cost
Custodian (Overtime & Holiday costs only)	2 Hr. Min.		X		=	
Supervisor (Overtime and Holiday costs only)	2 Hr. Min.		X		=	
Nutritional Services Worker (Must be on duty if kitchen is used)	2 Hr. Min.		X		=	
Theater Technician (required with sound and/or stage lighting)	2 Hr. Min.		X		=	

**GRAND TOTAL FEE**

**\$**

**Tiered Guidelines**

**Tier #1 (No Charge):** All School District #2 Sponsored Sports/Activities and Academic Programs

**Tier #2 (No Charge):** Booster Organizations, PTO's, and other Approved Organizations supporting District Activities

**Tier #3 (May be a charge dependent on regularly staffed hours and type of Organization):** Non-Profit Organizations and Other Organizations that fit in to this category

If the district must provide oversight this will be figured into the Fee Schedule Worksheet. The number of district monitors/supervisors depends on the size of the event and is solely determined by the District.

**Tier #4 (Charge):** Businesses, Profit Organizations, Groups using facilities for Profit, and additional Special Events for all tiers. The district will provide over site and/or custodial services that will be figured into the Fee Schedule Worksheet. The number of district monitors/supervisors depends on the size of the event and is solely determined by the District.