

**PARK COUNTY SCHOOL DISTRICT #6  
BOARD OF EDUCATION POLICY**

KF-R2

**WORKING COPY**

**FACILITY USE APPLICATION**

~~Instructions to applicants: This application must be submitted to the secretary of the Activities Office, located in the high school, no earlier than six months in advance or and no later than fifteen 15 business days prior to the day of the event. Priority for facilities/ and equipment will be given to school activities and non-school organizations that benefit PCSD-6 district school-age students. This application must be completed in its entirety before submission. Applicant must complete all information on the front of the application. All non-school events which charge admission must provide proof of liability insurance to the secretary of the District's Activities Office.~~

Facility Requested \_\_\_\_\_ Rooms \_\_\_\_\_

Date(s) Facility Would Be Used \_\_\_\_\_ Estimated Time In \_\_\_\_\_ Time Out \_\_\_\_\_

Equipment requested \_\_\_\_\_

Explain what the facility will be used for (type of meeting) \_\_\_\_\_

Any special instructions, information, or supplemental personnel requests: \_\_\_\_\_

~~For Profit Organization~~ \_\_\_\_\_ ~~Non-Profit Organization~~ \_\_\_\_\_ Admission Charge? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Organization \_\_\_\_\_

Name of Person Submitting Request \_\_\_\_\_

Name of Person in Organization who will be Supervising Function \_\_\_\_\_

Address & Phone No. of Person Supervising Function \_\_\_\_\_

Name, address, & phone of contact person \_\_\_\_\_

Name of Organization's Liability Insurance Company \_\_\_\_\_ Date of Policy \_\_\_\_\_

Copy of ~~ACCORD Certificate or other~~ Proof of Insurance Attached **consistent with KF R-1?** Yes \_\_\_\_\_  
No \_\_\_\_\_

Name of District Employee(s) Supervising/Attending Function \_\_\_\_\_

District Employee Phone # \_\_\_\_\_

The **D**istrict assumes no responsibility for injury to any individual using a district facility nor does the **D**istrict assume liability for lost or stolen items belonging to an individual using a district facility. Any individual, group, or member of a group using a district facility will indemnify and hold the **D**istrict harmless of any liability in the event of any such injury or theft.

The undersigned sponsor evidences by ~~his/her~~ **their** signature that the group or organization will comply with the rules, ~~and regulations/procedures~~, **and all district policies**, ~~as stated on the accompanying form.~~ The undersigned sponsor also understands that ~~he/she~~ **they** will be the responsible party for all rental charges and other fees for the rental of facilities for this group. The undersigned acknowledges that ~~he/she~~ **they** agrees to make full restitution to ~~PCSD-6~~ the District for any damages resulting from the use of the facility. ~~PCSD-6~~ **The District** reserves the right to cancel this agreement **at any time** ~~after notice has been given to the responsible party or their designee.~~

**48 Hours Notice must be given to PCSD-6 the District for canceled events to avoid charges.**

Signature of Person Representing Organization \_\_\_\_\_ Date \_\_\_\_\_

Adopted: 1/20/98  
Revised: 7/19/06