

APPLICATION FOR USE OF SCHOOL FACILITIES
(To be filled out by applicant and/or building principal or his designee)

Name of Applicant: _____

Street Address: _____ City _____ Zip _____

Phone: (Work) _____ (Home) _____ (Cell) _____

Organization or Group: _____

Date(s) Requested: _____

Beginning Time: _____ Ending Time: _____ Actual Event Time (if applicable): _____

Facility Requested: _____ Building: _____

Purpose: _____

Admission Charged: Yes No Donation Requested: Yes No If yes, how many people? _____

Please check all personnel needed: Custodian (Required for Weekend and PM events) Security

Technician Cafeteria Employee

The person signing this application assumes on behalf of the group the responsibility to see that buildings and equipment are not misused, that groups have adequate adult supervision, and that all rules and regulations of the Board of Education of the Monroeville Local School District are followed. It is also understood that school activities have priority for any use of the building. Any school activity that must be scheduled will take precedence for the use of the building.

Date: _____ Applicant's Signature: _____

Approved: Not Approved: Principal's Signature: _____ Date _____

_____ (Responsible Party) agrees to indemnify and HOLD HARMLESS the Monroeville Board of Education and their agents and employees from all liability, claims, demands, damages, or costs, for, or arising out of above said purpose whether it be caused by the negligence of responsible party or Monroeville Board of Education or either party's agents or employees, or otherwise.

_____ Signature

Note: All fees payable to the Board of Education Office. DO NOT PAY custodian directly.

-----DO NOT WRITE BELOW THIS LINE-OFFICE USE ONLY-----

Final tally of fees for use of school facilities. Forward Board Office copy upon completion of activity, for billing purposes. Accept no money at the individual buildings.

Building Charge: _____ x _____ hrs.= \$ _____
Personnel Fee: _____ x _____ hrs.= \$ _____

TOTAL CHARGES: \$ _____

Date submitted to Board Office: _____ **Time slips for personnel must be attached to this form.