

### FINDLAY CITY SCHOOLS APPLICATION FOR USE OF SCHOOL FACILITY

Section I

Organization \_\_\_\_\_

Date of Application \_\_\_\_\_

Contact Person \_\_\_\_\_

Admission Charged?     Y     N

Billing Address \_\_\_\_\_

Anticipated Attendance \_\_\_\_\_

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

Purpose \_\_\_\_\_

(Profit or Non Profit)

Phone: (Required) \_\_\_\_\_

Section II – Rental Fees

Building \_\_\_\_\_

Date(s) of Event \_\_\_\_\_

Hours \_\_\_\_\_ a.m./p.m. \_\_\_\_\_ a.m./p.m.  
(open) (close)

If series of events, circle appropriate days of week:

M   T   W   TH   F   SAT   SUN

Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

Check desired needs:

	Minimum 4-hour rentals (unless otherwise noted)	or	Fraction thereafter	Estimated Cost
<input type="checkbox"/> Auditorium (High School)	\$260.00		\$65.00 per hour	\$ _____
<input type="checkbox"/> Half Gymnasium (Middle Schools)= full size court	\$130.00*		\$65.00 per hour	\$ _____
<input type="checkbox"/> Full Gymnasium (Middle Schools)= entire gym six (6) baskets	\$400.00 <small>* 2 hour min.</small>		\$100.00 per hour	\$ _____
<input type="checkbox"/> Multipurpose Rooms (Primary)	\$100.00		\$25.00 per hour	\$ _____
<input type="checkbox"/> Cafetorium (Middle Schools)	\$160.00		\$40.00 per hour	\$ _____
<input type="checkbox"/> Cafeteria	\$100.00		\$25.00 per hour	\$ _____
<input type="checkbox"/> Kitchen (Food Service Employee required)	\$100.00		\$25.00 per hour	\$ _____
<input type="checkbox"/> Community Room (Middle Schools)	no minimum		\$25.00 per hour	\$ _____
<input type="checkbox"/> Classrooms	\$ 25.00		\$ 6.25 per hour	\$ _____
<input type="checkbox"/> Labor – Food Service Employee - \$22.00 per hour per employee				\$ _____
<input type="checkbox"/> Labor – Custodial Employee - \$32.00 per hour per employee (based on actual hours worked including set-up and clean-up)				\$ _____
<input type="radio"/> <b>TOTAL ESTIMATED BUILDING RENTAL</b>				\$ _____

I understand the regulations governing the use of school facilities, have completed the ‘‘Hold Harmless Clause’’ on the attached Form 6.02a-f5, and hereby agree to all terms and conditions. Proof of comprehensive liability insurance in amounts not less than \$500,000/individual and \$1,000,000/aggregate claim is required if applicant is not a school-sponsored group and must be provided to the treasurer’s office no later than one week prior to the date of the event. Failure to provide proof of insurance will result in cancellation of the facility rental.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:**

Building Principal     Approved     \_\_\_\_\_     Signature \_\_\_\_\_     Date \_\_\_\_\_

Disapproved     \_\_\_\_\_     Reason \_\_\_\_\_

**Copies to: Customer; Building; Maintenance; Food Service; Superintendent’s Office**

Adopted 5/29/07  
Reviewed 5/23/2012  
Revised 1/18/2013  
Revised 2/11/2013  
Revised 3/14/2013