

REQUEST FOR USE OF FACILITIES

ESPARTO UNIFIED SCHOOL DISTRICT

26675 Plainfield Street – Esparto, CA 95627

Office – 530-787-3446 Fax – 530-787-3033 Emergency – 530-681-7074

1. Date _____ **Facility Requested** _____ **School** _____

2. Date Facility Needed _____ **Time Facility Needed** _____

3. Description of Activity _____

4. Tables Needed _____ **Chairs Needed** _____ **Other** _____

5. Name of Organization _____ **School Sponsored** **Yes** **No**

6. Admission Charge **will** **will not** **be made.** _____

7. If proceeds are collected they will be used for: _____

8. Persons responsible for supervision of this activity: _____

9. Persons responsible for cleanup: _____

If cleaning is not done – you can be held responsible for the cost of cleanup. _____ Phone _____

10. Applicant please initial here to indicate awareness of possible fees to be charged: _____

Initials

We hereby certify that the undersigned organization and the undersigned individual will be jointly and severally liable for any damage sustained on the school premises, furniture or equipment because of the occupancy of said premises by our organization. We agree to abide by and to enforce the rules and regulations of the Board of Trustees governing the use of school premises. BP / AR 1330. The organization agrees to reimburse the District for any damages or losses caused by the organization, it's members or any of their guests on or about District property arising out of or incidental to the use authorized by this permit, within seven days after receipt from the District of notice of the nature or any such damage or loss and the established cost of repair or replacement. The organization further agrees to indemnify and save the District harmless from any loss or claim be reason of personal injury to, or damage to property suffered by, any person on or about District property which arises out of the negligence of the District, the joint negligence of the District and the organization, or the negligence of the organization. The District shall be named insured upon endorsement of the organization's policy for continuing activities or may be provided a special events policy for single activities at District option.

The undersigned states that to the best of their knowledge, the school property for use of which application is hereby made will not be used for the omission of any act intended to further any program or movement the purpose of which is to accomplish to overthrow the government of the United States by force, violence or other unlawful means.

That _____ organization on whose behalf he/she is making application for use of school property, does not, to the best of his/her knowledge, advocate the overthrow of the Government of the United States or the State of California by force, violence or other unlawful means, and that, to the best of his/her knowledge, it is not a communist-action organization required by law to be registered with the Attorney General of the United States. This statement is made under penalty of perjury.

Person completing this form: _____

Please Print

Signature

Address: _____ **Phone:** _____

Liability Insurance Carrier: _____

A COPY OF LIABILITY INSURANCE NAMING ESPARTO UNIFIED SCHOOL DISTRICT CO-INSURED MUST BE ATTACHED FOR NON-SCHOOL SPONSERED GROUPS.

PLEASE FILL OUT THIS PAGE COMPLETELY

(Any additional information put under notes on back page)

OFFICE USE ONLY

Insurance endorsement provided: _____

District personnel needed: _____

Fees to be charged: _____

Classification of group: _____

Fee-breakdown: _____

Date fees collected: _____

Site approval: _____

Kitchen or room approval: _____

District approval: _____

End of Activity additional fees to be charged – reason: _____

Extra fees: _____ **Collected:** _____

By: _____

Notes: _____

