SCHOOL FACILITIES

05.31 AP.21

Request for Rental/Use of Facilities Application

NAME OF REQUESTING ORGANIZATION			Middle School Gyn or other AREA OF THE FACILITY			
Jim Williamson/ Chris PERSON WHO WILL BE		February 1 - March 31 Cor ail				
SUPERVISING		DĄ́	DATE(S) THE FACILITY IS REQUESTED			
THE REQUEST AREA(\$)	OF THE EACH INV WHITE	FRC	ом Па.м	P.M. TO ["JAM PM		
Gallatin Co. Youth Spo	OF THE FACILITY WILL F	oe Used FUK es) / Soccer n	. THE FOLL ractice (liv	OWING ACTIVITIES:		
Gallatin Co. Youth Sports Rec. Basketball (games) / Soccer practice (limited) Is the organization planning to conduct sales on school premises? No						
- '	5	- v premove	110			
APPROXIMATE #OF PER		o include par	ent specta	tors.		
I request waiver of the rental fee. I request wavier of the charge for custodian.						
<u>Fee Schedule</u>						
The organization agrees to pay the applicable fee(s) for the use of District facilities.						
Cont. Jin.	# of Employees Required	# of Hours	Hourly Rat	e (Overtime at 1.5 times)	Total	
Custodians School Nutrition Employees						
Other						
Facility/Equipment Fee \$ Personnel Cost Insurance Cost \$ Total Cost						
I have read the Rules and Regulations for Community Use of School Facilities and agree on behalf of the requesting organization to assume personal responsibility for the proper use of the above named areas of the facility and acknowledge that approval of this request does not signify District sponsorship, endorsement or approval of this organization or the activity. I understand that tobacco use is prohibited 24 hours a day, 7 days a week on school owned property, in school yehicles and buildings as established in policy 05.31 Jim Williamson PO Box 914 Warsaw, Ky 41095 SIGNATURE OF PERSON MAKING REQUEST ON BEHALF OF THE ORGANIZATION						
12/11/14 Home859-743-6905 DATE TELEPHONE			Work502-347-6962			
In the event school is closed due to weather conditions, all scheduled activities, with the exception of dinner meetings, will be cancelled and opportunity to reschedule or refund rental fee(s) will be made.						
AREA BELOW FOR OFFICIAL USE ONLY						
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Martha Sebring for Café Requests			Date			
Jon Jones/Linda Edmondson		Dațe				
Keith Howard for Auditorium Requests (High School)			Date			
Principal Date		Superinter		D-		
<u> </u>	lot Approved		ргоved	Dat	, ¢	
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Board Chairperson		Board Me	cting Date	Review/Revised:7/2	.5/11	