

December Board Meeting – Facility Usage Request

A Toliver staff member has requested to use Toliver gym from 8 to 9:30 PM on Wednesday evenings from Dec. through April with an adult group for indoor soccer.

Robin Kelly is requesting to waive any facility usage fee as there will be no custodial costs involved. The staff member will be responsible for ensuring the security of the building.

The usage fee for an elementary gym is \$52.50 for 1.5 hours. Twenty evenings would cost this group \$1050, which far exceeds any minimal utility costs associated with this usage.

As this is a group focused on their health, usage is requested at a time that will not conflict with any school activity or event, and cost of usage is very minimal, I recommend either the fee be reduced based on fair reimbursement costs, or the fee waived entirely.

Christy Denny

Application for Community Use of School Property

The undersigned applicant hereby requests the following community use of school facilities.

Name of Facility: <u>ELTIS GYM</u>	Date(s) Requested: <u>WED NIGHTS 8-9:30</u> <u>NOV - APRIL 2011</u>
Purpose: <u>COMMUNITY BACKUP SOCCER HOSTED BY GRACE TWO SPARROWS PROGRAM</u>	
Beginning Time: <u>8:00</u>	Ending Time: <u>9:30</u> (indicate AM / PM)
Are sales to be conducted on site? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, give a complete description of what will be sold, when the sale will occur, and for what the proceeds will benefit:	

I. GENERAL PROVISIONS

The undersigned applicant agrees and certifies to the Danville Board of Education that all activities and programs conducted on school property shall be subject to the following terms and conditions.

- A. All activities or events must be scheduled by the Principal/designee.
- B. That the activities and uses of the property shall be the responsibility of the applicant and shall be conducted in accordance with all school rules and regulations. Applicant shall be liable for any damages which occur to the school property during use by applicant.
- C. Danville Schools Central Office will bill user group for facility rental and personnel costs including overtime salary and fringe benefits. Rental of Gravelly Hall also includes the costs for the Technical Director. Use of school kitchen includes costs of a food service employee.
- D. That use of a school facility for personal profit is prohibited. Use of a school facility for non-school fundraising is prohibited.
- E. The use of tobacco is prohibited at all times in or on any property owned or operated by the Board and in outdoor facilities owned or operated by the Board during all District-sponsored activities, including sporting events.
- F. The use and/or sale of alcoholic beverages is prohibited in school buildings or on school grounds.
- G. No immoral or illegal activities shall be permitted on any property or ground owned by the Board.
- H. No organization will be allowed to sell or serve soft drinks or food unless permission is granted prior to the rental.
- I. The organization using the facility must make arrangements for crowd control as well as supervise participants.
- J. The school will be responsible for routine maintenance before and after rental. Please notify the Principal/designee of any conditions that need to be corrected. The applicant is responsible for leaving the facility and grounds in the same condition as they were found. It is further understood that a school employee (custodian) is required to be in the building during all uses of the facility. The employee insures security, unlocks and locks the facility, and handles all utility usage/emergency response when warranted.
- K. The renting organizations and officers thereof, shall name the school as an additional insured on the group's insurance coverage, receiving contractual hold harmless and indemnification protection and requiring note of cancellation of the outside group's insurance coverage.
- L. The renting party shall not sublease or reassign any portion of the building or item of equipment covered by the rental contract.
- M. That the Danville Board of Education shall, in all cases, have the final decision governing the use of school facilities
- N. Approval of this request does not signify District sponsorship, endorsement or approval of your organization or the activity.

NOTE: The specific requirements set forth in Board policy 05.31 shall be adhered to.

Application for Community Use of School Property**FEES FOR LEASE OF SCHOOL FACILITIES**

Facilities	Usage Fees	Estimated Personnel Wages
Gravelly Hall	\$300 per event \$150 per practice	Tech Director @ \$22.50 hr. Custodian @ \$20 hr.
Cafeteria	\$25 per hour	Food Service Employee @ \$15 hr. Custodian @ \$20 hr.
Classroom	\$25 per hour	Custodian @ \$20 hr.
DHS Gym	\$50 per hour	
BMS Gym	\$40 per hour	
MGH, ELT, JRE Gym	<u>\$35 per hour</u>	
Practice football field	\$75 per event	
Athletic Fields	\$100 per event	
Admiral Stadium	\$275 per event	
Hourly wage and fringe for custodian will not apply if use of facility occurs during the custodian's regular work schedule.		
A minimum fee of two hours will be charged unless rental fee is per event.		

II. RENTAL AGREEMENT


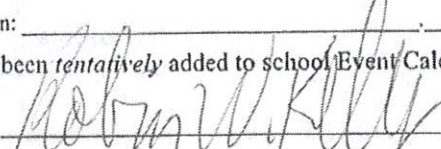
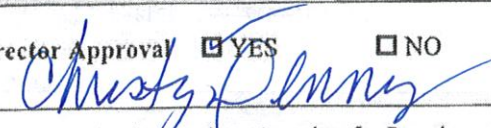
	Hours	Rate	Total
Rental Fee			
Practice Session (s)			
School Supervisor			
Media Technician			
Custodian			
Additional Staff			
Damage Deposit			
TOTAL DUE			

Special Instructions: _____

Copies of the Rental Agreement will be sent to the School Representative, Organization Representative, and the Danville Board of Education.

Robin Kelly
is requesting
that usage
fees be
waived. —
(see
memo)

Application for Community Use of School Property**III. Rental Agreement**

To be completed by APPLICANT	
<i>I have read the terms and conditions of this lease of school facilities and agree to be responsible of compliance with each term listed above.</i> SIGNED: <u></u> PER <u>KEVIN DILBECK of GRACE CHURCH</u> PRINT NAME: <u>DANNY GOODWIN</u> CONTACT PHONE NUMBER: <u>859.236.9137</u> ORGANIZATION: <u>GRACE CHURCH (TWO SPARROWS)</u> BILLING ADDRESS: <u>180 BOLD VENTURE CT.</u> <u>DANVILLE</u> <u>VA</u> <u>24042</u> <div style="display: flex; justify-content: space-between; font-size: small;"> STREET STATE ZIP </div>	
<i>Applicant: Submit completed form to building Principal for approval</i>	
To be completed by BUILDING PRINCIPAL	
Principal Approval <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <i>If request is not approved, explain below and mail copy of this form to applicant</i> Non-approval explanation: _____ If approved, event has been tentatively added to school Event Calendar. <input type="checkbox"/> YES <input type="checkbox"/> NO Principal Signature: <u></u> Date: <u>11-7-17</u> <i>Principal: Upon approval, submit form to Facilities Director for consideration.</i>	
To be completed by BOARD PERSONNEL	
Facilities Director Approval <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Signature: <u></u> Date: <u>12/5/19</u> <i>Director: Upon approval, submit to Superintendent for Board consideration.</i>	
Board Approval <input type="checkbox"/> YES <input type="checkbox"/> NO Superintendent/Board Signature: _____ Date: _____ <i>Central Office Personnel: Submit/mail copy of approval or non-approval to requesting group and Principal.</i>	

REVIEW/REVISED: 8/21/2017



GRACE-4

OP ID: MB

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/12/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION** IS **WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Johnson Pohlmann Insurance 129 S. Fourth Street Danville, KY 40422 Scott A. Burks	859-236-5922	CONTACT NAME: Scott A. Burks PHONE (A/C, No, Ext): 859-236-5922 FAX (A/C, No): E-MAIL ADDRESS: sburks@johnsonpohlmann.com
INSURED Grace Presbyterian 180 Bold Venture Danville, KY 40422		INSURER(S) AFFORDING COVERAGE INSURER A: Cincinnati Insurance Company INSURER B: Kentucky Employers' Mutual Ins INSURER C: INSURER D: INSURER E: INSURER F:
		NAIC # 10677 10320

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			EPP0354614	11/01/2017	11/01/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			EPP0354614	11/01/2017	11/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTIONS <input type="checkbox"/>						EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	331483	11/01/2017	11/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

DANVI4H

Danville Board of Education
152 E Martin Luther King Blvd
Danville, KY 40422

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE