

## USE AGREEMENT

This agreement made by and between the Boone County Board of Education,  
Matt Shafer as Principal authorized so to act by direction of the Board of Education and  
City of Union, hereinafter referred to as "user" of the school  
facilities hereinafter described.

### WITNESSETH:

The principal does hereby agree to permit user to utilize certain school facilities more  
particularly described as follows: Ryle Campus parking lot,  
grassy field by Ceray and practice fields on  
Winners Circle. Please see attached site map  
at the following times and dates: June 30, 2023 5:30PM - 10:00PM subject to the  
following terms and conditions:

1. The school property identified above may be utilized by the user as a permittee at will on  
the condition that all terms and conditions as hereinafter set out are complied with and  
any other terms and conditions specified by the Principal. Any violation of such terms  
and conditions may result in immediate termination of the Use Agreement and/or liability  
of the user. The utilization of the premises by the user is a privilege extended to the user  
by the Board of Education and said use does not constitute a property right nor shall it be  
deemed a lease or renewable beyond the specified period without the written consent of  
the principal.
2. The use of these school facilities shall be in compliance with all laws and regulations and  
the terms and conditions of Boone County Board of Education policies, including but not  
limited to BCBE Policy No. 05.3, 05.31, 05.32 and 10.3 which are incorporated by  
reference herein.

3. The reserved time/date for use by user may be cancelled preempted by Principal and permission for use may be terminated without cause by notice from Principal.
4. User is responsible for the conduct of its participants or guests.
5. There shall be no subletting or assignment of this agreement nor any profit making or commercial venture subject of the use.
6. User shall return the facilities or premises in the same condition as at the commencement of the use, or if user fails to do so; the user will be responsible for the cost of clean-up and be prohibited from further use of facilities.
7. The user agrees to save harmless the Boone County Board of Education, its employees and agents, for any liability, damage, loss or expense incurred respecting the utilization of the school facilities; and the user agrees to reimburse the Boone County Board of Education for any damages to or replacement of school property damaged, lost, stolen or vandalized while in users name.

IN WITNESS WHEREOF the principal for and on behalf of the Board of Education and the user hereunto set their hands this 2 day of November, 2022.

PRINCIPAL of Larry A. Ryle High School

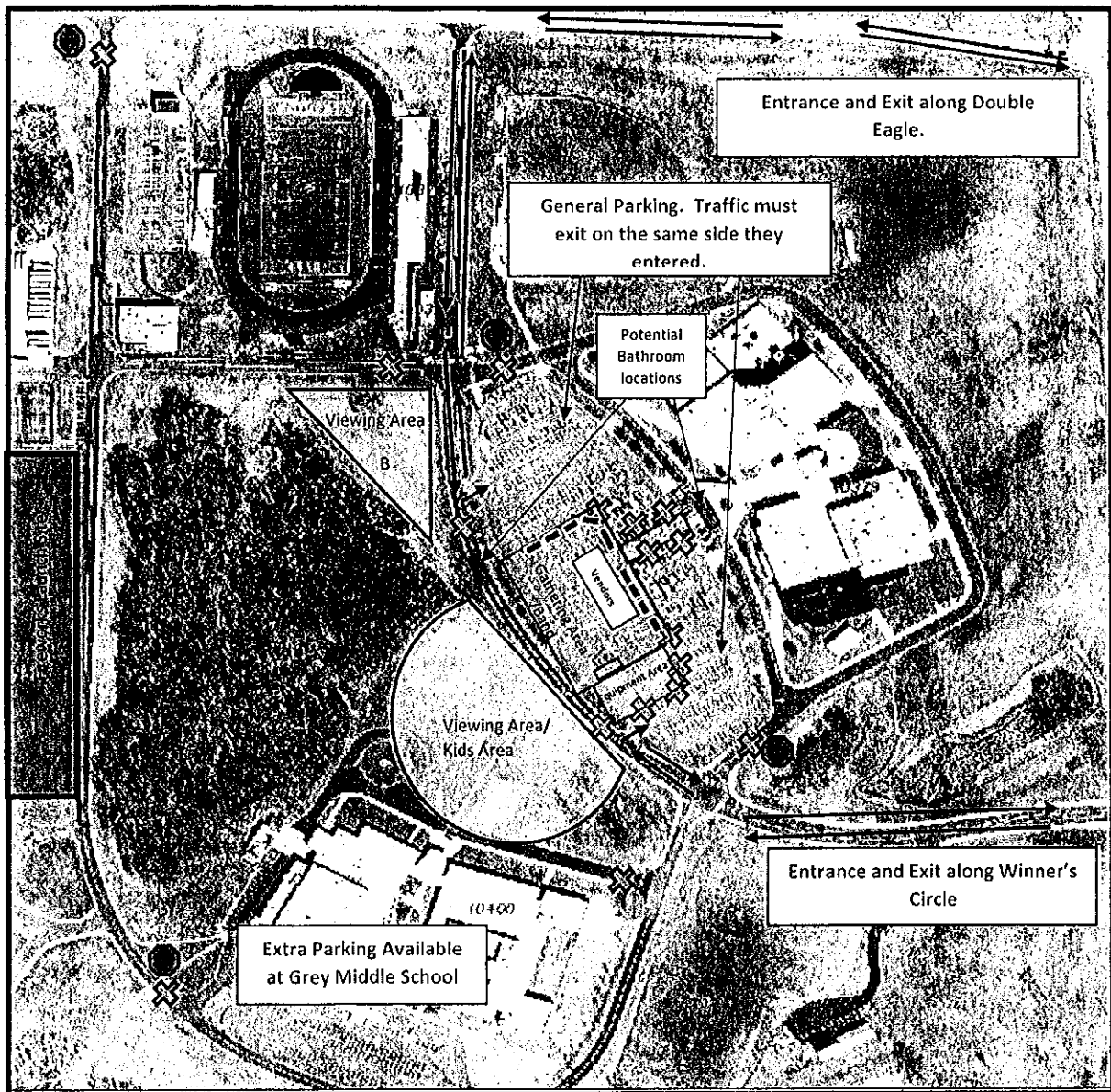
Amy Safran / City of Union  
USER NAME / SIGNATURE

1843 Bristow Drive  
ADDRESS

Union KY 41091  
CITY STATE ZIP

(859) 384-1511  
PHONE NUMBER

# Union Celebrates America Site Plan





CITYUN-R01

JR0DGRS

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/20/2022

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).

<b>PRODUCER</b> Houchens Insurance Group 505 Wellington Way, Suite 275 Lexington, KY 40503		<b>CONTACT</b> Janey Rodgers, CIC <b>PHONE</b> (A/C, No, Ext): (859) 303-4211 <b>FAX</b> (A/C, No): (859) 296-4583 <b>E-MAIL</b> ADDRESS: jrodgers@higusa.com		
<b>INSURED</b>  City Of Union KY 1843 Mt. Zion Road Union, KY 41091		<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
		INSURER A: Kentucky League of Cities		S0510
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

## 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	ADD'L SUBR INSD YYY	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 <input checked="" type="checkbox"/> Public Officials \$2M  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	L5542-2022-21986	7/1/2022	7/1/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY  ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>		L5542-2022-21986	7/1/2022	7/1/2023	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"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	W5542-2019-17700	7/1/2022	7/1/2023	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 4,000,000 E.L. DISEASE - EA EMPLOYEE \$ 4,000,000 E.L. DISEASE - POLICY LIMIT \$ 4,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
RE: 4th of July - Union Celebrates America. Certificate holder is an additional insured in regards to general liability except as otherwise provided by the policy.

## CERTIFICATE HOLDER

## CANCELLATION

Boone County Board of Education 8330 US 42 Florence, KY 41042	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 