

FLOYD COUNTY BOARD OF EDUCATION Anna Whitaker Shepherd, Superintendent 442 KY RT 550 Eastern, KY 41622 Telephone (606) 886-2354 Fax (606) 886-4550 www.floyd.kyschools.us

William Newsome, Jr., Board Chair - District 3 Linda C. Gearheart, Vice-Chair - District 1 Dr. Chandra Varia, Member- District 2 Keith Smallwood, Member - District 4 Steve Slone, Member - District 5

<u>Consent Agenda Item (Action Item):</u> Prestonsburg High School Football parent boosters is requesting permission to use the turf facility at Prestonsburg High School for their fully insured flag football league.

<u>Applicable Statute or Regulation:</u> Board Policy 01.11 General Powers and Duties of the Board of Education

<u>Fiscal/Budgetary Impact:</u> No financial responsibilities. Prestonsburg High School Football parent boosters will cover all cost and liabilities.

<u>History/Background:</u> Prestonsburg High School is continuing to attempt to increase overall participation at the high school level. By engaging the youth, the league will provide a foundational structure to increase high school participation.

<u>Recommended Action:</u> Floyd County Board of Education allows Prestonsburg High School Football parent boosters is requesting permission to use the turf facility at Prestonsburg High School for their fully insured flag football league.

Contact Person(s): Charlie Rice, Football Boosters/606-226-9957

Wesley Hager, Head Football Coach/606-886-2252

Ricky Thacker, Principal/ 606-886-2252

Date: 7-17-2024

The Floyd County Board of Education does not discriminate on the basis of race, color, national origin, age, religion, marital status, sex, or disability in employment, educational programs, or activities as set forth in Title IX & VI, and in Section 504.

SCHOOL FACILITIES 05.31 AP.21

Application and Agreement for Use of District Property

<u>NOTE:</u> Please complete this form in duplicate and submit both copies to the Central Office designee for approval. If the application is approved, one (1) copy of the signed agreement will be returned to the using organization along with a contract prepared by the Board attorney. The contract shall be signed by the designated representative of the using organization and returned to the Central Office designee. If the application is not approved, both copies will be returned.

Name of Sponsoring Organiza	tion/Activity _	Blackcat You	ıth Football	Telephone 6062269957				
Representative's Name Charles Rice								
Address 163 S Cardinal Dr Prestonsburg, KY 41653								
The above organization/individual requests the use of:								
☐ auditorium ☐ gymnasium ☐ dining room/kitchen ☐ stadium								
□ classroom(s) □ other, specify								
Is the organization planning to use District-owned equipment? MYES NO If yes, specify equipment PHS Football Concessions Operator's Name Blackcat Youth Football								
Is the organization planning to cond	Is the organization planning to conduct sales on school premises? YES \(\sigma\) NO							
If yes, give a complete description of what is being sold and how the proceeds will be used. Concessions will be sold at youth flag football games and all proceeds will go to PHS Parent Football Boosters								
Building/school/facility Prestonsburg High School / Blackcat Stadium								
Purpose_Youth Flag Football (Age	Purpose Youth Flag Football (Ages 5-8)							
Date(s) requested 8/1/2024 - 11	/2/24		Time(s) Req	uested 5PM-8PM				
Will public be admitted?	☑ yes □ no							
Will advertisement(s) be used?	☑ YES □ NO							
Will admission be charged?	□ yes☑ no							

When using school facilities, this organization agrees to observe the following:

- I. To schedule with the building Principal the time(s) District property is to be used. It is understood that the Superintendent/designee may cancel the use of the room or building at any time such use interferes with regular school activities.
- 2. To be legally responsible for any and all damage to individuals and school equipment, building(s), grounds, or facilities, resulting from use by the organization. To this end, the organization will procure sufficient liability insurance to indemnify the Board, school officers and employees for any injuries or property damage which might occur during the organization's use of the facilities. This insurance shall contain limits of \$1,000,000 for bodily injury and \$10,000 for property damage. A copy of the organization's insurance certificate shall be filed with the Board prior to the date the organization uses the building. The Board shall require the renting organization to assume all liability for injury to individuals by reason of the lease of Board property and that the organization indemnify and save harmless the Board from any loss or damage thereby.
- 3. To provide appropriate equipment for the use of District property. When gymnasiums are used, the organization agrees to permit on the gym floor only those persons wearing shoes that will not mark the floor.
- 4. To abide by the requirements of Board Policies 05.3 and 05.31 (see attached). Disregard of the rules and regulations governing the use of the school buildings, equipment and facilities shall result in the refusal of the Board to grant the offending organization further use.
- 5. To acknowledge that approval of this request does not signify District sponsorship, endorsement or approval of your organization or the activity.

Total

Application and Agreement for Use of District Property

FEE SCHEDULE

Custodians

The organization agrees to pay the applicable fee(s) for the use of District facilities. # of Employees Required Hourly Rate (Overtime at 1.5 times)

of Hours

Food Service Employees						
Supervisory Personnel						
Other	,					
		T	OTAL PEI	RSONNEL CHAI	RGE	
Property Used		Equ	cility/ ipment Fee	Personnel Cost, if applicable	Insurance cost, if applicable	Total Cost for Facility Use
•	Gymnasium					
atschool						
Auditorium						
atschool						
Cafeteria - 🗆 Dining Room 🗆 Kitchen 🗆 Both						
atschool						
Classi	oom(s) Number					
at	school_					
	Stadium					
at	school					
	Other Property			-		
at	school					
	erles Rice		·	6-9	9-2024	
Signature - Representative of User Gro						

IN THE EVENT SCHOOL IS CLOSED DUE TO WEATHER CONDITIONS, ALL SCHEDULED ACTIVITIES, WITH THE EXCEPTION OF DINNER MEETINGS, WILL BE CANCELED AND OPPORTUNITY TO RESCHEDULE OR REFUND RENTAL FEE(S) WILL BE MADE.

Date

Signature - Superintendent/designee

Application and Agreement for Use of District Property

For Office Use Only - To be Completed by School Official							
Cost for use of District property \$ Deposit \$	Cost for school employee \$Total cost \$ Is deposit refundable? □ Yes □ No						
Date Deposit Received Board employee(s) assigned:	Balance Due \$						
Board Action Date, if applicable							

Review/Revised:9/29/11

PHSFOOT-01

JGIBSON

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/3/2023

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 hol if SUBROGATION IS WAIVED, sub- this certificate does not confer right	der is ject t s to th	an Al o the e cer	DDITIONAL INSURED, the terms and conditions of the terms and conditions of the terms are the terms a	e policy of the policy such en	/(les) must h blicy, certain dorsement/	ave ADDITION policies ma	ONAL INSURED provision oy require an endorseme	ons or b ent. A s	e endorsed. tatement on
PRODUCER			CONTACT NAME:						
Hall-Clark Ins. Agency, Inc. 132 South Lake Drive Suite 101 Prestonsburg, KY 41653			PHONE (A/C, No. Ext): (606) 886-2318						
			E-MAIL (ACC, NO):(000) 000-2351						
				DECLE STOLLD A London					NAIC#
INSURED Prestonsburg Football Parent Boosters PO box 1476 825 Blackcat Blvd Prestonsburg, KY 41653			INSURER A : SECURA Insurance					22543	
			INSURER 8:						
			INSURER C:						
			INSURER D:						
			INSURI						
COVERAGES CF	RTIF	CATI	E NUMBER:	INSURI	RF:				
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, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS.								ICY PERIOD WHICH THIS THE TERMS,	
A X COMMERCIAL GENERAL LIABILITY	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP	LIMI LIMI	TS	
CLAIMS-MADE X OCCUR	1		CP3374379		0/00/000		EACH OCCURRENCE	\$	1,000,000
		1	01.0014010		9/26/2023	9/26/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	-	ł					MED EXP (Any one person)	\$	
GEN'L AGGREGATE LIMIT APPLIES PER:	-	l ,					PERSONAL & ADV INJURY	\$	1,000,000
POLICY PRO LOC							GENERAL AGGREGATE	\$	2,000,000
OTHER: General Aggregate	ļ						PRODUCTS - COMP/OP AGG	\$ S	2,000,000
AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	s	
ANY AUTO OWNED AUTOS ONLY AUTOS	1				i		BODILY INJURY (Per person)	s	**
F				İ			BODILY INJURY (Per accident)	s	-
AUTOS ONLY AUTOSWIED							PROPERTY DAMAGE (Per accident)	\$	
								5	
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADI							EACH OCCURRENCE	5	
98 3110 112 101		1		1			AGGREGATE	s	
DED RETENTIONS								s	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	. 1			İ]	1	PER OTH- STATUTE ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A	i		i		ļ	E.L. EACH ACCIDENT	<u> </u>	
If yes, describe under DESCRIPTION OF OPERATIONS below	1]					E.L. DISEASE - EA EMPLOYEE	\$	
DESCRIPTION OF OPERATIONS below		!					E.L. DISEASE - POLICY LIMIT		
						ļ			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC DDITIONAL COVERAGES: CYBER SECU 1,000,000/ \$2,000,000,Abuse & Mole	LES (A RITY \$ station	CORD - 50,00 n \$1,0	101, Additional Remarks Schedul 0, HIRED & NON-OWNED 00,000/\$2,000,000	e, may be LIABIL!	attached if more TY \$1,000,00	space is require 0, PROFESS	d) Onal Liab/Fitness & F	RECREA	TIONAL
ERTIFICATE HOLDER	·	··· <u> </u>		CANC	LLATION				
				<u>vanul</u>					 1
Prestonsburg Football Parent Boosters Inc PO Box 1476 Prestonsburg, KY 41653				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
				John Libora					

ACORD