



**BEECHWOOD INDEPENDENT SCHOOL DISTRICT
BOARD OF EDUCATION**

RENTAL/ USE OF FACILITY
Community Groups

50 Beechwood Rd., Ft. Mitchell, KY 41017 (859) 331-3250 www.beechwoodkyschools.us Fax (859) 331-7528

TODAY'S DATE: 07/31/2024 DATE(S) OF ACTIVITY: 08/25/2024

PLEASE CHECK WITH HS SECRETARY TO BE SURE SITE IS AVAILABLE FOR THE DATES REQUESTED.

INSTRUCTIONS: To request the use of the cafeteria, either gym, high school classroom, kitchen, or any athletic field your request must start in the high school office to determine availability of the area requested. To request the use of an elementary classroom or any space located in the elementary, the elementary principal will determine the availability of the area requested. Once approved by the principal, the request will be submitted to the Superintendent. If approved, the request will be put on the agenda for the next Board of Education meeting for final approval.

NAME OF REQUESTING ORGANIZATION: Homage Independent, LLC

PERSON(S) WHO WILL BE PRESENT AND SUPERVISING THE ACTIVITY: Brittany Jackson and Kristen Kidwell

LOCATION(S) REQUESTED FOR ACTIVITY: Cafe Old Gym Auxillary Gym Lower Turf Field
 Upper Turf Field Field House Viewing Room Other: If the old gym is bigger, that would be best
 Kitchen-requires a Food Service staff member be present, requesting group is responsible for cost.

TIME OF ACTIVITY/EVENT: FROM 10 AM or PM TO X 5:00 AM or PM.

START TIME FOR SET UP: 9:15/30 END TIME FOR CLEAN UP: 4:30/45 5:00pm

DOORS (TO BE KEPT OPEN DURING ACTIVITY IF APPLICABLE) (Please check or circle required entrances)

DOORS OPEN FROM: 9:30 - 4:30
 Elem Main Entry #2 HS Entry #10
 Aux Gym Lobby #14 Other, be specific: The door by the baseball field

APPROXIMATE NUMBER OF PERSONS WHO WILL BE ATTENDING THE ACTIVITY: 50

IF THIS IS A CONTINUING REQUEST, INDICATE THE DURATION BELOW:

Beginning _____ and continuing through _____.

THE REQUESTED LOCATION(S) WILL BE USED FOR THE FOLLOWING ACTIVITY: A spin clinic for a new independent winter guard team

Is the organization planning on using any equipment located on school property? Yes No

If yes, specify equipment: The winter guard's floor/tarp

Is the organization planning to conduct sales on school premises? Yes No

If yes, give a COMPLETE description of what is being sold and how the proceeds will be used: There is a \$30 fee to participate

Custodial service requested yes no. Fees may apply. Heating/Cooling needed yes no.

Check Fee Schedule for any applicable fees, 05.3 AP.2

I have read the Rules and Regulations for Community Use of School Facilities and the Use of Facilities Assurances of Acceptable Behavior, and agree on behalf of the requesting organization to assume personal responsibility for the proper use of the above named areas of the facility.

Brittany Jackson
SIGNATURE OF PERSON MAKING REQUEST ON BEHALF OF THE ORGANIZATION

3781 Bunnell Road, Lebanon Ohio 45036
ADDRESS

homageindependent@gmail.com
EMAIL

513-680-2339
CELL

AREA BELOW IS FOR OFFICE USE ONLY

SITE IS AVAILABLE. HS SECRETARY INITIAL

Approved Not Approved

Adam Yankee (Signature)
PRINCIPAL'S SIGNATURE 8/5/24
Date

Approved Not Approved

(Signature)
SUPERINTENDENT'S SIGNATURE 8/5/24
Date

Approved Not Approved

SCHOOL BOARD CHAIR Date

STIPULATIONS:

CONTACT PERSON WILL BE NOTIFIED BY EMAIL.

Original - Director of Operations Office

Copies will be emailed to: Maintenance/Custodial Supervisors, Principal, HS Secretary for Facility Book,

05.31 AP.21