## **USE AGREEMENT**

This agreement made by and between the Boone County Board of Education, <u>Andy Wyckoff</u> as Principal authorized so to act by direction of the Board of Education and <u>Northern Ky Youth Athletics (NKY Bandits and Hebron Cougars)</u> 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:

## The Stadium and Game Field for Football Games

at the following times and dates:

8/9/25: 10am-1pm, 8/23/25 5-8pm, 8/30/25 1-4pm, 9/6/25: 1-4pm, 10/4/25: 1-4Pm 10/11/25: 1-7pm. Dates and times subject to change based on weather and playoffs and field availability.

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 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 or 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 user's name.

IN WITNESS WHEREOF the principal for and on behalf of the Board of Education and the user hereunto set their hands this <u>30th</u> day of <u>May</u>, <u>2025</u>.

**CONNER HIGH SCHOOL** 

BY: PRINCIPAL

Jaw Dauwe Northen Kentucky Youth Athletics. NKY

Bandits/Hebron Cougars

USER/SIGNATURE

2517 Northern Dancer Ct

**ADDRESS** 

BurlingtonKy41005CITYSTATEZIP

**859-803-2056** PHONE NUMBER



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/21/2025

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). CONTACT NAME: Jerri Reich (513) 872-7519 FAX (A/C, No): PHONE (A/C, No, Ext): E-MAIL ADDRESS: (513) 221-1140 CAI Insurance Agency, Inc. jreich@cal-insurance.com 2035 Reading Road NAIC # INSURER(S) AFFORDING COVERAGE 15350 West Bend A Mutual Ins Co OH 45202-1415 Cincinnati INSURER A: INSURED INSURER B: Northern Kentucky Youth Athletics, Inc dba NKY Athletics INSURER C: PO Box 330 INSURER D : INSURER E: KY 41048-7965 Hebron INSURER F 25-26 Master **REVISION NUMBER:** CERTIFICATE NUMBER: COVERAGES ED NAMED ABOVE FOR THE POLICY PERIOD THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE IN RESPECT TO WHICH THIS INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR O' CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESC D HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY P :LAIMS ADDL SUBR POLICY EXP (MM/DD/YYYY) LIMITS POLICY NUMBER TYPE OF INSURANCE 1,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 300,000 CLAIMS-MADE | CCUR 10,000 MED EXP (Any one person) 1,000,000 04/24/2026 04/24/2025 A268863 PERSONAL & ADV INJURY 2,000,000 **GENERAL AGGREGATE** GEN'LAGGREGATE LIMIT APPLIES PER: 2,000,000 PRO-JECT PRODUCTS - COMP/OP AGG POLICY OTHER COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY (Ea accident) BODILY INJURY (Per person) ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED BODILY INJURY (Per accident) s AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) AUTOS O 1,000,000 UMBRELLA LIAB EACH OCCURRENCE OCCUR 1,000,000 04/24/2026 04/24/2025 A268863 **EXCESS LIAB** AGGREGATE CLAIMS-MADE DEO RETENTION \$ WORKERS COMPENSATION PER STATUTE AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N/A E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Conner High School - Boone County Board of Education AUTHORIZED REPRESENTATIVE

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