

**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 RHS PTSA 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 Entire Campus

at the following times and dates: Nov 21st 2026 - Nov 22nd 2026

21st 2:30pm till 22nd 11:00 pm 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 or District Administration and permission for use may be terminated without cause by notice from Principal or District Administration.
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.
8. The User acknowledges that approval of this request does not signify District sponsorship, endorsement or approval of their organization or the activity.

Use Agreement

IN WITNESS WHEREOF the Principal for and on behalf of the Board of Education and the User hereunto set their hands this 30 day of September, 20 25.

Ryle High School SCHOOL

BY:   
PRINCIPAL

PtSA Ryle High School - Angie Deatherage  
USER

10379 US 42  
ADDRESS

Union Ky 41091  
CITY STATE ZIP

859-512-2977  
PHONE NUMBER



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/04/2025

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 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>  Association Insurance Management 12221 Merit Drive, Suite 1670 Dallas, TX 75231  Insured Number KY196258		<b>CONTACT NAME: AIM</b>  <b>PHONE No: 800-876-4044</b> <b>FAX No: 214-360-0802</b> <b>EMAIL ADDRESS: AIM@AIM-COMPANIES.COM</b>  <b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Concert Specialty Insurance Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b>		<b>NAIC #</b> 17151
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**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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF MM/DD/YYYY	POLICY EXP MM/DD/YYYY	LIMIT							
A	GENERAL LIABILITY	Y	N	GL2025AIM37996	09/01/2025	09/01/2026	EACH OCCURRENCE	\$1,000,000						
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$50,000						
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$5,000						
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$1,000,000						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$ 2,000,000						
							PRODUCTS - COMP/OP AGG	\$ 2,000,000						
							Sexual Abuse/Molestation	Not Covered						
							Media Liability	Not Covered						
							AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	
							ANY AUTO						BODILY INJURY (Per person)	
	ALL OWNED AUTOS						BODILY INJURY (Per accident)							
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident)							
		<input type="checkbox"/> NON-OWNED AUTOS												
	UMBRELLA LIAB						EACH OCCURRENCE							
	EXCESS LIAB						AGGREGATE							
	DED													
	RETENTION \$													
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N					WC STATO-TORY LIMIT	OTH-ER						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under	<input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT							
							E.L. DISEASE - EA EMPLOYEE							
							E.L. DISEASE - POLICY LIMIT							
A	Directors & Officers			DO2025AIM31883	09/01/2025	09/01/2026	Per Occurrence/Aggregate \$1,000,000							
A	Fidelity Bond (Crime)			CR2025AIM27999	09/01/2025	09/01/2026	Per Occurrence/Aggregate \$10,000							
A	Property (Inland Marine)			IM2025AIM05881	09/01/2025	09/01/2026	Per Occurrence/Aggregate \$10,000							

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

Boone County Schools is added as an additional insured under the General Liability policy only, on a primary and non-contributory basis subject to a written contract or agreement.

**CERTIFICATE HOLDER**

Boone County Schools  
8330 US Hwy 42  
Florence, KY 41042

**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

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ACORD 25 (2010/05)

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07/03/2025

## Facility Use Agreement Application

This application must be completed and attached to the Facility Use Agreement along with all corresponding required documents. Incomplete applications or those submitted without all required documents will be returned without consideration.

Today's Date September 29, 2025

### Requestor's Contact Information

Name: Angie Deatherage

Organization: Ryle HS PTSA

Does this organization have non - profit status? ☒ Yes ☐ No  
If yes, please attach documentation.

Contact number: 859.512.2977

Email address: angiedeatherage@gmail.com

### School / Location Requested

Ryle HS

### List all areas needed:

Lobby, mezzanine, large gym, small gym, cafeteria, parking lots

\*\* ex. Auditorium, football field, practice field, parking lot, classrooms (list number needed) kitchen, cafeteria etc.

Date(s) of program / event : November 21-22, 2025

Program/ event time: Nov. 21 @ 7:00-10:00, Nov. 22 @ 9:00-3:00

11/21 @ 3:00-11:00, 11/22 @ 7:00-5:00  
Actual time needed: \_\_\_\_\_ Include set up / tear down / clean up / restoration time

Expected number of attendees: 6,000

Is this event part of a fundraiser? ☒ Yes ☐ No \*\* If yes, please attach a copy of the submitted fundraiser approval

How is this event/ program being advertised? Please attach any relevant flyers, media notices, social media postings, registration information etc.

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Event is advertised via FB event and signs around town the week leading up to the event.

Do you have liability insurance?  X  Yes   No \*\* If yes, please attach a copy of your Certificate of Insurance.

Who is responsible for supervision of the attendees of this event / program?

Angie Deatherage, Ryle PTSA Ways and Means

Purpose of the event / program:

To provide fundraising funds for the school's teachers, students and programs/events.

Safety and Emergency Procedures:

Exit the building or secure in place if an emergency would arise.

Inclement Weather Plan :

N/A

Site restoration plan:

\*\* Include the plan for trash removal, cleaning of facilities, returning of equipment etc.

For programs over multiple days, there should be a plan for nightly restoration.

We will have custodians available for the full duration of the event. We also have many volunteers who come to help clean up once the event is over.

For outdoor only events:

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Plan for restroom facilities. Will you be using school facilities? Providing portable restrooms?


N/A

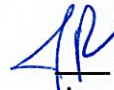
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**This section to be completed by school or district administration**

**Please initial each item.**

 Administration has reviewed the application in its entirety and has attached all required documents.

 Administration has checked the **Active Facility and Construction Projects** document to ensure there is no conflict with scheduled work.

 For athletic events, administration has coordinated with the Athletic Director to ensure there is no conflict with previously scheduled events.

**Rental Application and Contract****CONDITIONS OF RENTAL**

All rental of school facilities is subject to the following conditions:

1. An official application shall be made to the Superintendent or his designee.
2. Rentals will be made only to responsible and organized groups, and responsible officers of that group must sign the application and the contract.
3. Conditions of that contract shall include:
  - a. Acceptance of responsibility by officials of the renting organization for any damage or loss resulting from the rental; AD Initials
  - b. Agreement that renting organizations, and officers thereof, shall assume all liability for any personal injuries incurred during their use of the facilities and shall hold the Board harmless from any such claims against it; AD Initials
  - c. Agreement to observe all fire and safety regulations; AD Initials
  - d. Agreement that the use of any tobacco product, alternative nicotine product, or vapor product shall not occur on or in all property. The use of alcoholic beverages is prohibited in school buildings or on school grounds; AD Initials
  - e. Observance that no immoral or illegal activity shall be allowed on the premises; AD Initials
  - f. The presence of a school custodian at all times. The hourly wage of the custodian(s) must be included in the contract along with the social security and retirement payments required by law. If the custodian is employed beyond the normal 40-hour week that he works for the Board, overtime wages must be paid. AD Initials
  - g. The presence of a food-service employee when kitchen facilities are used. The hourly wage of the employee must be included in the contract along with social security and retirement payments required by law. AD Initials
  - h. Agreement that no kitchen equipment may be used outside the building; AD Initials
  - i. Agreement that no alterations to the buildings or grounds be made without prior approval; AD Initials
  - j. Agreement that the renting party shall not sublease or reassign any portion of the building or item of equipment covered by the rental contract; AD Initials
  - k. Agreement that school equipment shall not be a part of the rental contract unless specifically enumerated; AD Initials
  - l. Agreement to leave the facilities in as good a condition as before used. Groups using outdoor facilities free of charge shall do the cleaning themselves or bear the cost of necessary custodial services. AD Initials
  - m. Agreement that only the agreed upon, assigned areas / spaces of the property may be used. AD Initials

- n. Agreement that parking in designated areas will be enforced by the renter. There is no parking in grass areas or non-designated parking areas unless included as part of the original facility use agreement. AD Initials
- o. Agreement that there are to be no alterations to designated handicap parking spaces through the addition of or removal of signage AD Initials

**REFERENCES:**

KRS 158.149; KRS 162.055; KRS 438.050; KRS 438.305

OAG 81-295

P. L. 114-95, (Every Student Succeeds Act of 2015)



**Rental Application and Contract**

**RELATED POLICIES:**

03.1327; 03.2327; 05.3; 06.221; 09.4232; 10.3; 10.5

Adopted/Amended: 8/8/2019  
Order #: VI.2A

**Fee Schedule****GYMNASIUM**

Community Recreational Use	\$ 25.00 per hour
Other Uses	\$100.00 per hour
	3 hour minimum

**CAFETERIA/KITCHEN FACILITIES**

	\$100.00 per hour
	3 hour minimum

**HIGH SCHOOL AUDITORIUM**

	\$100.00 per hour
Gym with stage/Cafeteria with stage	3 hour minimum

The hourly rate plus fixed charges and overtime, when appropriate, will be charged for employees necessary to facilitate building rental.
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Review/Revised:7/21/2011

## REQUEST FOR SALES CAMPAIGN OR SOLICITATION OF FUNDS BY STUDENTS \*

SCHOOL: Ryle High SchoolFACULTY ADVISOR(S): Angie DeatherageSPONSORING CLUB OR ORGANIZATION: Ryle High School PTSAACCOUNT WHERE FUNDS ARE TO BE DEPOSITED: Ryle PTSA Bank AccountPROPOSED DATE TO START AND END CAMPAIGN: 2/1/25-11/24/25WHAT IS TO BE SOLD AND HOW: Booths for craft fair sold to vendors and tickets sold to the publicCOMPANY FURNISHING PRODUCT: 160+ vendorsCOMPANY ADDRESS: N/APROFIT AGREEMENT WITH COMPANY (EXAMPLE 60/40): 100%ESTIMATED PROFIT TO BE REALIZED: \$35,000EXPLAIN REASON FOR THE NEED OF FUNDS: All funds are to be used for school sponsored activities and events.DOES THIS FUNDRAISER VIOLATE TITLE IX EQUITY ISSUES? YES ☒ NOCURRENT ACCOUNT BALANCE: \$0 AS OF: 2/1/2025FINANCIAL SECRETARY SIGNATURE: N/APLEASE CONFIRM FUNDRAISER IS REDBOOK COMPLIANT (initial) JHAs Faculty Advisor I am familiar with procedures for accounting for funds outlined in "A Uniform Program of Accounting for School Activity Funds".ADVISOR SIGNATURE Angie Deatherage DATE: 9/2/25PRINCIPAL APPROVAL [Signature] DATE: 9/5/25FINANCE APPROVAL Katie Noonan DATE: 9/17/25SUPERINTENDENT APPROVAL Kim Best DATE: 9/18/25FLYER: YES NO ☒ FLYER NEEDS APPROVAL FOR DISTRIBUTION, PLEASE ATTACH FLYER APPROVAL \_\_\_\_\_-----  
\*\*PLEASE COMPLETE INFORMATION BELOW AND RETURN TO DISTRICT OFFICE WITHIN 30 DAYS OF CAMPAIGN!\*\*

FINAL AMOUNT COLLECTED FROM THIS CAMPAIGN: \_\_\_\_\_

DESCRIBE USE OF FUNDS COLLECTED AND EXPENDITURES: \_\_\_\_\_  
\_\_\_\_\_

ADVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\*Please reference Board Policy 09.33 for guidelines.

Review/Revised 6/28/2024