



Bullitt County Public Schools

1040 Highway 44 East

Shepherdsville, KY 40165

<https://www.bullittschools.org/>
(<https://www.bullittschools.org/>)

MEMO

TO: Dr. Jesse Bacon, Superintendent
FROM: Thomas Stokes
DATE: 01/16/2026
RE: Board Agenda Item: Community Use of School Facilities

Bullitt Lodge #155 F&AM has submitted a facility use form seeking permission to use Bullitt Central HS on the following days:

06/07/2026

All required documentation has been verified. I recommend approval of this request.

Please reach out with any questions.

Thomas Stokes

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Application and Agreement for Use of District Property

Requestor Name

Chris Bell

Requestor Email

christopher.bell43@gmail.com

Name of Sponsoring Organization/Activity

Bullitt Lodge #155 F&AM

Telephone

(502) 415-2994

Representative's Name

Chris Bell

Address

192 Birchwood Drive

City

Shepherdsville

State

KY

Zip

40165

The above organization/individual requests the use of:

- ☐ auditorium
- ☐ gymnasium
- ☐ dining room/kitchen
- ☐ stadium
- ☐ classroom(s)
- ☒ other

Specify other

Parking Lot

☒ I understand that a \$50 per hour fee will be charged if district custodial staff are required.

Is the organization planning to use District-owned equipment?

☐ Yes ☒ No

Is the organization planning to conduct sales on school premises?

☒ Yes ☐ No

Give a complete description of what is being sold and how the proceeds will be used.

Entry fee of \$20 for car show, food and drinks will be sold, we will have a silent auction plus a 50/50 raffle. The proceeds raised will be split between the three high schools for scholarship money to

School

Bullitt Central HS

Purpose

To host a car show by the Mason of Bullitt County

☒ Single Event ☐ Ongoing Use (multiple days)

Event Start

06/07/2026 1:00 PM

Event End

06/07/2026 5:00 PM

Will public be admitted?

☒ Yes ☐ No

Please explain:

Public is free, car entries are \$20.00 per entry

Will advertisement(s) be used?

☒ Yes ☐ No

You must get approval for advertising using this form:

[Request for Advertising \(https://app.droplet.io/form/0rADeK\)](https://app.droplet.io/form/0rADeK)

Please explain:

we will advertise on social media and probably put up a banner.

Will admission be charged?

☒ Yes ☐ No

Please explain:

public is free, car entries will be \$20.00

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

1. To schedule with the Superintendent/designee 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.

For Office Use Only - To be Completed by School Official**Cost for use of District property**

\$50

Cost for school employees

\$0

Total cost

\$50.00

Deposit**Is deposit refundable?**☐ Yes☐ No**Date Deposit Received****Balance Due****Board employee(s) assigned****Board Action Date****Board Order #****Date of Use**

06/07/2026

length of Time

4 HOURS (1:00-5:00)

Fee Schedule

Total Personnel Charge

\$0.00

Grand Total Cost

\$50.00

RATES FOR DISTRICT FACILITY USE

RATES FOR DISTRICT FACILITY USE
District leadership may set additional charges if not specifically stated.

ALL PURPOSE ROOM

- o \$30 for up to 3 hours, \$5 per hour each additional hour

AUDITORIUM

- \$50 for up to 3 hours, \$10 per hour each additional hour

GYMNASIUM

- \$50 for up to 3 hours, \$10 per hour each additional hour

CAFETERIA

- \$30 per hour

KITCHEN

- \$50 per hour, SFS personnel must be present

KITCHEN AND CAFETERIA

- \$80 per hour, SFS personnel must be present

OUTSIDE PROPERTIES

- \$30 for elementary/middle schools
- \$50 for high schools

TURF USE

- Requires \$50 maintenance fee

CUSTODIAL STAFF

- Requires \$50 per hour, per employee assigned.

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

Chris Bell

Signature - Representative of User Group

01/08/2026

Date Signed

Joe Pat Lee

Signature - Principal

01/16/2026

Date Signed

Thomas Stokes

Signature - Superintendent/designee

01/16/2026

Date Signed

Does this require Board approval?

☒ Yes ☐ No

Would you like to add any notes or special requests?

Optional

☒ HVAC Scheduled/Not Needed

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Client#: 1117949

GRANDLODS

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/14/2026

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services LLC 312 Elm Street, Suite 2400 Cincinnati, OH 45202 855 874-1390		CONTACT NAME: Mark Weimer PHONE (A/C, No, Ext): 513 852-6300 E-MAIL ADDRESS: mark.weimer@usi.com FAX (A/C, No): 5138526454	
INSURED Grand Lodge of Kentucky F&AM PO Box 99159 Louisville, KY 40269		INSURER(S) AFFORDING COVERAGE INSURER A: Markel Insurance Company INSURER B: Cincinnati Insurance Company INSURER C: Bridgefield Casualty Insurance Company INSURER D: INSURER E: INSURER F:	
		NAIC # 38970 10677 10335	

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)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Y	MNGG0003222	01/01/2026	01/01/2027	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			MNGG0003222	01/01/2026	01/01/2027	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			EUP0057208	01/01/2026	01/01/2027	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N Y N/A	19641757	11/01/2025	11/01/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

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

** Workers Comp Information **

Proprietors/Partners/Executive Officers/Members Excluded:

Mitchell May, Vice President

Richard Short, President

(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

Bullitt County Board of
Education
1040 Highway 44 East
Shepherdsville, KY 40165

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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