



BEECHWOOD INDEPENDENT SCHOOL DISTRICT  
BOARD OF EDUCATION

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

RENTAL/ USE OF FACILITY  
Community Groups

ODAY'S DATE: 1/30/26

DATE(S) OF ACTIVITY: 2/2/26 - 3/8/26

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

Once approved by the principal, the request will be submitted to the Superintendent. If approved, the request will be put in the agenda for the next Board of Education meeting for final approval.

NAME OF REQUESTING ORGANIZATION: Torch Prep

PERSON(S) WHO WILL BE PRESENT & SUPERVISING THE ACTIVITY: Andrew Erickson, Emily Shinkle

NAME OF EVENT: SAT Boot Camp

LOCATION(S) REQUESTED FOR ACTIVITY:  Cafe  Varsity Gym  Aux Gym  Lower Field  Upper Field

Fieldhouse Viewing Room  Performing Arts Center  Alumni Atrium  Teacher Learning Center  Student Center 2/9

Kitchen-requires Food Service staff be present. Requesting group is responsible for cost.  Other: only

TIME OF ACTIVITY/EVENT: FROM 5  AM or  PM TO 9  AM or  PM.

START TIME FOR SET UP: Mondays 5-6:30 END TIME FOR CLEAN UP: Sundays 5-6:30

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

DOORS OPEN FROM:  Elem Main Entry #2  HS Entry #10

Sundays 12-1:30, -Mondays 5-6:30  Aux Gym Lobby #14  Other, be specific

APPROXIMATE NUMBER OF PERSONS WHO WILL BE ATTENDING THE ACTIVITY: 72

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

beginning 2/2/26 and continuing through 3/8/26 (See attached dates)

THE REQUESTED LOCATION(S) WILL BE USED FOR THE FOLLOWING ACTIVITY: Teacher Learning Center, Student center on 2/9 only

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

If yes, specify equipment: Smartboard in TLC

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:

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.

SIGNATURE OF PERSON MAKING REQUEST ON BEHALF OF THE ORGANIZATION

ADDRESS

MAIL \_\_\_\_\_ CELL \_\_\_\_\_

AREA BELOW IS FOR OFFICE USE ONLY

SITE IS AVAILABLE, HS SECRETARY INITIAL

Approved  Not Approved

PRINCIPAL'S SIGNATURE

1/30/2026

Approved  Not Approved

SUPERINTENDENT'S SIGNATURE

1-30-26

Approved  Not Approved

SCHOOL BOARD CHAIR

Date

STIPULATIONS:

CONTACT PERSON WILL BE NOTIFIED BY EMAIL.

Original - Director of Operations Office

opies will be emailed to: Maintenance/Custodial Supervisors, Principal, HS Secretary for Facility Book, Dir. Of Technology if heat/AC requested, & Athletic Dir. if athletic facility requested.

05.31 AP.21

UPDATED January 2025

## TorchPrep

for SAT Prep – Optional but recommended!

**Dates:**

TorchPrep will provide SAT test prep sessions here at Beechwood prior to the SAT on the dates listed below.

Date	Day	Time	Session	Location
Feb 02	Mon	5:00pm - 9:00pm	1	Beechwood High School
Feb 08	Sun	12:00pm - 4:00pm	2	Beechwood High School
Feb 09	Mon	5:00pm - 9:00pm	3	Beechwood High School
Feb 22	Sun	12:00pm - 4:00pm	4	Beechwood High School
Feb 23	Mon	5:00pm - 9:00pm	5	Beechwood High School
Mar 01	Sun	12:00pm - 4:00pm	6	Beechwood High School
Mar 02	Mon	5:00pm - 9:00pm	7	Beechwood High School
Mar 08	Sun	12:00pm - 4:00pm	8	Beechwood High School

**On the fence about whether to sign up?  
Here is a video that may help you decide!**



**You can also explore their website for more information.**



THE HARTFORD  
BUSINESS SERVICE CENTER  
3600 WISEMAN BLVD  
SAN ANTONIO TX 78251

January 29, 2026

Beechwood Independent Schools  
54 BEECHWOOD RD  
FORT MITCHELL KY 41017

### Account Information:

Policy Holder Details :	TORCH PREP LLC
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### Contact Us

#### Need Help?

Chat online or call us at

(866) 467-8730.

We're here Monday - Friday.

Enclosed please find a Certificate Of Insurance for the above referenced Policyholder. Please contact us if you have any questions or concerns.

Sincerely,

Your Hartford Service Team



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/29/2026

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 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).

PRODUCER SPECIALTY PROGRAM GROUP LLC/PHS 46505771 The Hartford Business Service Center 3600 Wiseman Blvd San Antonio, TX 78251	CONTACT NAME: PHONE (866) 467-8730 (A/C, No, Ext):	FAX (A/C, No):
	E-MAIL ADDRESS:	INSURER(S) AFFORDING COVERAGE NAIC#
INSURED TORCH PREP LLC 901 JOHN ST NEWPORT KY 41071	INSURER A: Sentinel Insurance Company Ltd.	11000
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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	COMMERCIAL GENERAL LIABILITY  X CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  X General Liability	X	46 SBA RM3210	07/17/2025	07/17/2026	EACH OCCURRENCE	\$2,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:  POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000		
						MED EXP (Any one person)	\$10,000		
						PERSONAL & ADV INJURY	\$2,000,000		
	AUTOMOBILE LIABILITY  ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS					GENERAL AGGREGATE	\$4,000,000		
	NON-OWNED AUTOS					PRODUCTS - COMP/OP AGG	\$4,000,000		
						COMBINED SINGLE LIMIT (Ea accident)			
						BODILY INJURY (Per person)			
	UMBRELLA LIAB EXCESS LIAB					BODILY INJURY (Per accident)			
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$					OCCUR CLAIMS-MADE	PROPERTY DAMAGE (Per accident)		
							EACH OCCURRENCE		
							AGGREGATE		
	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 N/A				PER STATUTE	OTHR		
						E.L. EACH ACCIDENT			
						E.L. DISEASE - EA EMPLOYEE			
						E.L. DISEASE - POLICY LIMIT			

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

Those usual to the Insured's Operations. Certificate holder is an additional insured per the Business Liability Coverage Form SS0008 attached to this policy.

CERTIFICATE HOLDER Beechwood Independent Schools 54 BEECHWOOD RD FORT MITCHELL KY 41017	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  <i>Susan L. Castaneda</i>	

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