

REQUEST FOR USE OF SCHOOL FACILITIES

Name of Organization: ICC School Counselors → Grade 8 Orientation Program Number of persons in group: 100

Name, address, and telephone number of person(s) responsible for this group:

Dale Tuczinski

School requested (check one):

High School X
Elem/Middle School _____
Primary School _____

Room requested (check one):

Kitchen _____
Cafeteria _____
Library _____
Gymnasium /
Auditorium /
Athletic Field _____
Classroom(s) _____
Other Area _____

Additional Equipment Needed:

Laptop, projector + portable
screen - Auditorium
12 tables + 24 chairs for
the gymnasium

Activity to be held: _____

Please complete the following:

DAY	START DATE	STOP DATE	TIME START	TIME STOP
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY	<u>3/2/16</u>	<u>3/2/16</u>	<u>6:30 pm</u>	<u>8:00 pm</u>
FRIDAY				
SATURDAY				
SUNDAY				

I agree to the following terms and conditions:

1. I agree to comply with all district policies, procedures, rules and regulations pertaining to building/property use. (Complete rules are available in Central Office.)
2. Our organization assumes any and all risk while on school grounds, and, indemnifies and releases the school district, its Board of Education, its employee, officers, agents and assigns, from any and all liability whatsoever regardless of cause as an absolute term of this facilities use.
3. I have attached a certificate of liability insurance with Kinderhook Central School District as an additional named insured on my insurance policy.
4. I further guaranty that I have been duly and properly authorized by the Organization to bind the organization to this agreement.
5. **ALL FORMS SHOULD BE SUBMITTED TO MAINTENANCE ONE WEEK BEFORE REQUESTED USE OF FACILITIES.**

Dale Tuczinski
Signature of responsible person

Date

[Signature]
Approved

10-13-16
Date

Copies: White – Principal *Yellow – Building Custodian* Pink – Maintenance Office *Goldenrod – Organization