

**REQUEST FOR USE OF SCHOOL FACILITIES**

Name of Organization: Kinderhook Runners Club Number of persons in group: 150

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

Karen Dolge  
4535 Burnett St. Valatie, ny 12184, 518-256-6598

**School requested (check one):**

High School   
Elem/Middle School   
Primary School

**Room requested (check one):**

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

**Additional Equipment Needed:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Activity to be held: Running Club Spring Clinic

Please complete the following:

DAY	START DATE	STOP DATE	TIME START	TIME STOP
MONDAY				
TUESDAY				
WEDNESDAY	<u>4/18/18</u>	<u>6/6/18</u>	<u>6p</u>	<u>7p</u>
THURSDAY				
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.**

Karen Dolge 3/21/18  
Signature of responsible person Date

[Signature] 3-26-18  
Approved Date

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