

APPLICATION FOR USE OF SCHOOL FACILITIES

ALCOHOL, TOBACCO AND WEAPONS ARE NOT ALLOWED ON SCHOOL PROPERTY

Cancellations are to be made 5 business days in advance – contact David Jagannath at 509.751.6606

Name of Organization: _____

Contact Name: _____

E-Mail Address: _____

Business Phone: () _____ Home Phone: () _____ Cell Phone: () _____

Address: _____ City: _____ State: _____ Zip: _____

FACILITY REQUESTED (check all that apply)

- CHS Auditorium
 CHS Main Gym
 CHS Aux. Gym
 LMS Gym
 LMS Cafeteria
 Grantham Gym
 Heights Gym
 Highland Gym
 Parkway Gym
 Other _____

Event Title: _____

Event Dates: _____ Activity: _____

Setup Time: _____ Door Time: _____ Start Time: _____ *End Time: _____ *In order to accurately bill, lessee must contact assigned custodian at the conclusion of the event (custodian will provide cell phone number if necessary).

**Estimated total attendance (public, performers/players, etc.): _____

**If your event is one where people will come and go (i.e. tournaments), please estimate how many will attend over the course of the entire rental.

Other provisions or arrangements: _____

Certificates of general liability insurance, naming Clarkston School District as additional insured (Certificate Holder), covering bodily injury and property damage, with respect to the use and occupancy of the Facility with liability limits of not less than \$1,000,000, per occurrence, shall be provided within ten (10) days of the rental date. **Should additional costs be incurred, the District will charge lessee.** To help ensure the health and safety of young athletes, all groups are required to sign Youth Sports-Head Injury compliance statement.

Custodial and Kitchen employee costs are an additional expense. A minimum of four (4) hours for custodial costs is required to clean the facility and restrooms and to secure the facility, but may also be required for the duration of the event. Custodial hours will be set based on the estimated number of attendees and the scope of the event. Additional fees may be assessed if the actual attendance is greater than the estimated number of attendees. Kitchen staff are required with rental of any kitchen.

Access to school facilities is not granted until all requirements of this application are complete and approved by the school district and/or designee and applicant notified of approval. I understand that should the District not be able to find available staff to host my event, the event cannot take place.

I, the undersigned, have read and fully understand the rules and regulations (see attached) associated with facility use. I also understand and agree to pay in full, all charges associated with use within ten (30) business days of receipt of invoice from the Clarkston School District. I further understand that this represents an estimate of charges and that the charges in facility, equipment, and staff use, will directly reflect additional costs for such use.

Print: _____ **Sign:** _____ **Date:** _____
Organization Representative

Approved **Denied** _____ **Date:** _____
Clarkston School District Designee

FACILITY USAGE FEES

Facility usage fees for any organization that charges a fee for participation in a program, admission to a program (other than a school function), or using facilities for money making purposes.

Mark a quantity for all items related to your facility rental needs

QTY	RENTAL ITEMS	COST	LOCATION	ESTIMATE	ACTUAL
	*Auditorium (flat fee \$56+\$___/hr)	\$30/hr +	CHS	\$	\$
	Auditorium Technician (2hr min)	\$45/hr		\$	\$
	Auditorium Tech. Standby (2hr min)	\$30/hr		\$	\$
	Student Technicians	\$12/hr		\$	\$
	Cafeteria	\$10/hr		\$	\$
	Conference Room	\$10/hr		\$	\$
	Field	\$20/hr		\$	\$
	Gym	\$10/hr		\$	\$
	Kitchen	\$10/hr		\$	\$
	• Cook (2hr min)	\$40/hr		\$	\$
	Library	\$10/hr		\$	\$
	Lights (CHS, LMS, track and field events)				
	• Nov-Feb after 6pm-\$30 mandatory	\$30		\$	\$
	• Mar-Oct after 7pm \$20 mandatory	\$20		\$	\$
	Tennis Courts	\$20/hr		\$	\$
	**Track CHS	\$30/hr		\$	\$
	Track LMS	\$20/hr			
	Public Address System	\$NC		\$	\$
	Additional Mics/stands	\$5 ea.		\$	\$
	Wireless Microphone	\$10 ea.		\$	\$
	Stage Lighting (auditorium only)	\$20/day		\$	\$
	Spot Lights (auditorium only)	\$15 ea.		\$	\$
	Acoustic or Mobile Shell	\$40 ea.		\$	\$
	Riser (Choral)	\$5 ea.		\$	\$
	Grand Concert Piano	\$30		\$	\$
	Baldwin Grand Piano	\$30		\$	\$
	Orchestra Pit (auditorium only)	\$500		\$	\$
	Green Room (auditorium only)	\$25		\$	\$
	Dressing Room (auditorium only)	\$25		\$	\$
	Screen	\$10 ea.		\$	\$
	LCD Projector	\$50		\$	\$
	Slide/Overhead Projector	\$10 ea.		\$	\$
	TV/Video Player	\$10 ea.		\$	\$
	Monitor Speakers	\$5 ea.		\$	\$
	Chair Trailer (180 chairs)	\$50/hr		\$	\$
	Custodial (4hr standard)	\$40/hr		\$	\$
	Cook (2hr min)	\$40/hr		\$	\$
	Security (2hr min)	\$40/hr		\$	\$
	Other:	\$		\$	\$
	SUBTOTAL				\$
	ADJUSTED TOTAL District Use Only				\$

*Auditorium rental: Items relating to the Auditorium rental are not automatically included (i.e. stage lighting, piano, dressing room, microphones, etc.).

**No cars or trucks are to be driven on the CHS track. Carts and ATVs allowed only with permission.

Please mark ALL items you will need for your event. Auditorium capacity: 892 seats plus 4 cut-outs for wheelchairs.

<input type="checkbox"/> Yes <input type="checkbox"/> No Evidence of Insurance Received <input type="checkbox"/> Yes <input type="checkbox"/> No Evidence of Compliance Statement (4260-F2)	OFFICE USE ONLY
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**COMPLIANCE STATEMENT FOR YOUTH SPORTS – HEAD INJURY,
CONCUSSION, AND SUDDEN CARDIAC ARREST**

1. Name of organization requesting the facility: _____

2. Are you a private non-profit youth sports group? YES NO, if no, skip to #6

3. _____ requests the use of the Clarkston School District facilities for the following dates: _____

4. _____, a private non-profit youth sports group, verifies all coaches, athletes and their parent/guardian have complied with mandated requirements for the management of concussions, head injuries and sudden cardiac arrest as prescribed by state law (HB 1824, Section 2).

5. **Attached is a proof of insurance** under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least \$50,000 due to bodily injury or death to one person and at least \$100,000 due to bodily injury or death to two or more persons.

6. Signed: _____ Printed Name: _____
(Representative of Private Non-Profit Youth Sports Group – or Acknowledgement that this is not a non-profit youth sports group)
Date: _____

*Note: Access to school facilities may not be granted until all requirements of this application are complete and approved by the school district and/or designee.

FACILITY LEASE AND INDEMNIFICATION AGREEMENT

This lease and indemnification agreement, (hereinafter "Agreement"), is entered into by and between, Clarkston School District (hereinafter "Lessor"), and _____, (hereinafter "Lessee") regarding the Facility described as _____. The phrase "Facility" as used hereinafter shall include the building space above-described unless otherwise specifically provided.

Purpose. The Facility shall be used by Lessee for: _____

including activities normally ancillary thereto.

Term of Agreement. The Agreement term shall commence on _____ at _____ (a.m./p.m.), and shall terminate on _____ at _____ (a.m./p.m.), unless sooner terminated or renewed in the manner hereinafter provided.

Rent. As rent, Lessee shall pay _____, per term above described, payable on or before _____.

Return of the Property. At the time of termination of the Agreement, Lessee shall return the Facility to Lessor in as good a condition as the same was at the time Lessee took possession hereunder, reasonable wear and tear due to reasonable use and occupancy in conformance with the provisions of this Agreement excepted.

Insurance. Lessee shall procure and maintain in force, throughout the Agreement term or as long as Lessee remains in possession of the Facility, a broad form comprehensive general liability policy of insurance covering bodily injury and property damage, with respect to the use and occupancy of the Facility with liability limits of not less than \$1,000,000, per occurrence. ***Clarkston School District (Lessor) shall be named as additional insured on all such policies.*** Lessee shall provide Lessor with a certificate or certificates of such insurance within ten (10) days of the rental date.

Self-Insurance. If Lessee is self-insured through the Office of State Risk Management, a certified statement setting out (1) program approval of the state risk manager, and (2) coverage(s) (including additional named insured) enumerated in the Insurance Paragraph (above) of this Agreement shall be appended to this Agreement.

Agreement to Indemnify. Lessee shall indemnify the Lessor from and against any and all claims, demands, causes of action, suits or judgments including but not limited to, any claims of Insurance carriers, the Department of Labor and Industries, the Department of Social and Health Services, and any federal agency, health care provider or governmental taxation agency, (including costs and expenses incurred in connection therewith), for deaths or injuries to persons or for loss of or damage to property with the use and occupancy of the Facility by Lessee, its agents, servants, employees or invitees: Specifically, this contract of indemnity should be construed to mean the Lessee will indemnify the Lessor against losses resulting from the negligence of the Lessee. In the event of any claims made or suits filed, Lessor shall give Lessee prompt written notice thereof and Lessee shall have the right to defend or settle the same to the extent of its interest hereunder.

Assignment. Lessee shall not assign, convey, or transfer this Agreement or any interest herein, without the prior written consent of Lessor.

Notice. Any notice, declaration, demand or communication to be given by a party to this Agreement to the other shall be in writing and transmitted to the other party by personal service or certified U.S. Mail, return receipt requested, postage fully prepaid, addressed as follows:

TO LESSOR: CLARKSTON SCHOOL DISTRICT J250-185
1294 CHESTNUT STREET
CLARKSTON, WA 99403-0070

TO LESSEE: _____

The mailing and certifying of any such notice as herein provided shall be sufficient service thereof. All notices given in compliance with this section shall be deemed effective two (2) business days following the deposit thereof in the U.S. Mail, irrespective of the date of actual receipt of such notice by the addressee. Either party may by notice change its address for notice.

Legal Relationship. The parties to this Agreement execute the same solely as Lessee and Lessor. No partnership, joint venture, or joint undertaking shall be construed from these presents, and except as herein specifically provided, neither party shall have the right to make any representations for, act on behalf of, or be liable for the debts of the other. All terms, covenants and conditions to be observed and performed by either of the parties hereto shall be joint and several if entered into by more than one person. Unless otherwise specifically provided herein, no third party is intended to be benefited by the Agreement.

Applicable Law/Construction/Venue. This Agreement shall be governed and interpreted in accordance with the laws of the State of Washington. In the event this Agreement is in conflict with the provisions of any law or statutes governing the subject matter hereof, such law or statute only to the extent of such conflict shall be controlling. The venue of any action brought to interpret or enforce any provision of this Agreement shall be laid in the country in which the Facility is situated.

Entire Agreement. This Facility Lease and Indemnification Agreement contains the entire agreement of the parties hereto and supersedes all of their previous understandings and agreements, written and oral, with respect to this transaction. Neither Lessor nor Lessee shall be liable to the other for any representations made by any person concerning the Facility or regarding the terms of the Agreement. This Agreement may be amended only by written instrument executed by Lessor and Lessee or their lawful successors and assigns subsequent to the date hereof.

Compliance Statement for HB1824, Youth Sports-Head Injury(4260 F2). As a Private Non-Profit Youth Sports Group, we verify all coaches, athletes and their parent/guardian have complied with mandated policies for the management of concussions and head injuries as prescribed by HB1824, Section 2. Attached is a proof of insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least \$50,000 due to bodily injury or death for one person and at least \$100,000 due to bodily injury or death to two or more persons.

(Printed Name & Title) LESSEE

LESSEE Signature

(Printed Name & Title) LESSOR

LESSOR Signature