



Policy KG-AR

Adopted 1/10/00; Updated 7/1/16

FACILITY USE REQUEST FORM

Pleasant Hill Community Center

Organization Name: \_\_\_\_\_ Non-Profit?  Yes  No

Contact Person: \_\_\_\_\_

Street Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home

Home

Cell

Cell

Preferred Phone  Work \_\_\_\_\_ Other Phone  Work \_\_\_\_\_

Purpose for use \_\_\_\_\_

Number of people expected \_\_\_\_\_ Is event open to the public?  Yes  No

Indicate day(s) of the week:  Mon  Tues  Wed  Thu  Fri  Sat  Sun

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Start Time: \_\_\_\_\_  AM  PM End Time \_\_\_\_\_  AM  PM

Please Note: Times reserved must include set up and clean up time.

School District sponsored activities for students, parents and related organizations.  
No Rental Charge.  Front room only

Civic and service use - Non-profit community service groups; individuals using facilities for personal use.  
 Front room only - \$12 per hour.

Profit groups or individuals; fund raising groups, non-school groups receiving donations.  
 Front room only - \$24 per hour.

\*Confirmation of appropriate category of user will be made by the Superintendent.

Standard set up includes three rectangular tables and two arched tables in the front room, three rectangular tables in the back room and 100 folding chairs. You may move these items as needed, but you are expected to return them to the standard configuration when you are finished. If you would like us to clean up and/or set back up we can provide you with an estimate for custodial services.

Food/drink being served or allowed?  Yes  No

Custodial Services needed?  Yes  No

PLEASE NOTE:

- ❖ A refundable security/cleaning deposit will be collected in advance of activity (\$50-\$250).
- ❖ An insurance binder is required for Class III users and may be required for Class II users.
- ❖ If needed, custodial costs are figured on current time and one half plus benefits.(\$32.75/hr for 2014)
- ❖ District security is provided by Sonitrol Security Systems. **Failure to properly key into and out of the facility may result in additional security charges.** Security services are \$45 per hour for 2014. Please be sure you know how to properly use the system.

**IT IS MY UNDERSTANDING, AS CONTACT PERSON FOR ORGANIZATION, THAT:**

- 1 Only the facilities requested will be used.
- 2 Times and dates as specified shall be adhered to and notification to the district office is necessary if there is to be any change.
- 3 Every effort will be made to maintain cleanliness and care of the facility.
- 4 Any damage of items in need of attention/repair will be reported to the custodian or principal upon leaving or by the next business day.
- 5 It will be necessary to relinquish use of the facility if a school function is scheduled on the same date.
- 6 Cooperation is expected in order to make facilities available to all groups.
- 7 Key will be returned, if issued, as per instruction at time of issue.
- 8 Rules as posted or otherwise provided must be followed.
- 9 Failure to abide by the terms of this agreement may result in the denial of further use.
- 10 The school is under the Sonitrol electronic surveillance system. Please key in and out properly if you are the first in or last out of the buildings. Failure to do so may result in an additional charge.
- 11 An insurance binder will be provided for all Class III users and some Class II users.

\_\_\_\_\_  
Signature of Contact Person

\_\_\_\_\_  
Superintendent Signature

**INSURANCE BINDER GUIDELINES**

Any Class III user and some Class II users must obtain and maintain a General Liability Insurance Policy naming Pleasant Hill School District No. 1 as the additionally insured with the following limits:

\$2,000,000 General Aggregate, including wrongful acts and sexual molestation,  
\$1,000,000 Each Occurrence

\$1,000,000 Personal and Advertising Injury, \$1,000,000 Damage to Rented Premises  
\$10,000 Medical Expense, Waiver of subrogate on Worker's Compensation coverage

Certificate of insurance needs to be provided to the district prior to using the facilities.

**(FOR OFFICE USE)**

Building approval: Signature \_\_\_\_\_ Date \_\_\_\_\_

Availability confirmed by \_\_\_\_\_ Date \_\_\_\_\_

**Estimate of Fees:**

Facility charge \$ \_\_\_\_\_ per hour x \_\_\_\_\_ hours = \$ \_\_\_\_\_

Custodial costs \$32.75 per hour x \_\_\_\_\_ hours = \$ \_\_\_\_\_

Total Estimate for use \$ \_\_\_\_\_ Security/Cleaning Deposit \$ \_\_\_\_\_

Contact Person Notified by \_\_\_\_\_ Date \_\_\_\_\_

Pre-Payment of \$ \_\_\_\_\_ received \_\_\_/\_\_\_/\_\_\_ by  Cash  Check no: \_\_\_\_\_

Additional custodial charges incurred \$ \_\_\_\_\_

Security service charges incurred \$ \_\_\_\_\_

Security/Cleaning deposit (refunded) or additional payment due \$ \_\_\_\_\_ Pd \_\_\_/\_\_\_/\_\_\_

Insurance Binder Received:  Yes  No  N/A Date: \_\_\_\_\_

Key # \_\_\_\_\_ issued. Returned:  Yes  No Date: \_\_\_\_\_