LYNDONVILLE CENTRAL SCHOOL

Date(s) Requested: If more than 4. please last on apparate sheet) a.m. a.m. p.m. to		Application for Us	se of School Facilities		
Time Requested:			Occasionations		
Activity: Differentiation Differentiation	Date(s) Requested:	than 4 inlease list on senarate sheet)	Organization:		
Time Requested:			Activity:	1	
Name of person from organization responsible for AED (automated external defibrillator) use, if needed:	Time Requested:	p.m. to p.m.			
Name of person from organization responsible for AED (automated external defibrillator) use, if needed:					
Name of person from organization responsible for AED (automated external defibrillator) use, if needed: Name of person from organization responsible for payment and Certificate of Insurance:				Saturday and Sunday requires a	
Name of person from organization responsible for AED (automated external defibrillator) use, if needed: Name of person from organization responsible for payment and Certificate of Insurance:	,		custodial fee.		
Name of person from organization responsible for payment and Certificate of Insurance: (Please be sure to read and sign back of application.) FACILITIES REQUESTED:	Tigii School Wildu	ne denoti Diememary			
Calceria Supervision (required if kitchen is used) Adult Supervision (required if kitchen is used Adult Supervision (required if kitchen is used Adult Supervision (required if kitchen is u	Name of person from organization	on responsible for AED (automated	external defibrillator) use, if nee	eded:	
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Classrooms					
Table and Chairs (How many?)					
TO BE COMPLETED BY BUSINESS Custodial hrs. @ \$24.50 = \$		application.			
OFFICE: Custodial hrs. @ \$24.50 = \$ Rental Fee: Cafeteria hrs. @ \$12.50 = \$ Athletic Fields \$ No Charge Media Personnel hrs. @ \$45.00 = \$ Athletic Field Refreshment Stand 5.00 AED Provider hrs. @ \$45.00 = \$ Athletic Field Refreshment Stand 5.00 AED Provider hrs. @ \$45.00 = \$ Auditorium rehearsal other than day of performance 7.00 PLEASE PAY THE CHARGES LISTED BELOW BEFORE THE EVENT DATE: Gymnasium 3 hours or less) 30.00 RENTAL FEES \$ Each additional hour 5.00 OTHER CHARGES \$ Locker Rooms (each) 5.00 OTHER CHARGES \$ Cafeteria (without kitchen) 25.00 OTHER CHARGES \$ Cafeteria (with kitchen) 25.00 OTHER CHARGES \$ Cafeteria (with kitchen) 25.00 SHOWN SCHOOL c'o School Business Administrator, P. O. Box 540, Lyndonville, NY 14098-0540 Classrooms (each) 5.00 SHOWN SCHOOL c'o School Business Administrator, P. O. Box 540, Lyndonville, NY 14098-0540 I HAVE READ AND SIGNED THE USER AGREEMENT ON THE BACK OF THIS FORM AND WILL OBTAIN A CERTIFICATE OF INSURANCE. □ Business Office Applicant's Name: □ Business Office Address: □ Cafeteria □ Cafeteria APPROVED: □ Date □ Other	☐ Playfield(s)		I able and Chairs (H	ow many?)	
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Auditorium		nd 5.00	AED Provider	hrs. @ \$45.00 = \$	
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Principal Date APPROVED: File			Date		
MINO I ED.	Principal		Date		
	APPROVED: School Business A	dministrator	Date		

Revised 8/11/06

All organizations wishing to use school facilities must submit the proper paperwork to the Business Office at least two (2) weeks before a Board Meeting. Board Meetings are held on the second and fourth Mondays of the month. The request is subject to the approval of the Lyndonville Central Board of Education and the availability of the building.

The organization/designee is responsible for completing the necessary forms.

The following regulations shall be in force:

- 1. The applicant in charge of this activity shall assume full responsibility for proper supervision and shall agree to assume responsibility for payment of costs of any damages sustained in facility usage.
- 2. Smoking/Tobacco Use, Drugs, and Alcoholic beverages are not permitted on school property at any time.
- 3. Only the room or designated area granted in the original request shall be used.
- 4. Classroom materials and/or equipment are not to be used without specific permission.
- 5. All rooms and areas are to be left in an orderly condition after usage.
- 6. Outside groups must provide a certificate of insurance naming the Lyndonville Central School as the additional insured with a minimum liability coverage of \$1,000,000 at the time of the application.
- 7. Outside groups must have a person trained and certified in the use of AED's (defibrillators) in attendance whenever the group is meeting in the school building. School district personnel may fill this role. If no trained district personnel are available, then the organization must provide their own AED certified user, and must file their certificate of training with the district. Or, the organization may choose to pay for a trained AED user as a part of their fee.
- 8. Noncompliance with any of the foregoing regulations may, in the discretion of the Board of Education, result in the immediate revocation of such approval and the denial of further use of school facilities by the applicant.
- 9. The School Business Administrator, after consulting with the Head Custodian and/or the Board President, has the authority to close the school buildings and/or grounds, should conditions be inappropriate for community use and/or continued use places an unfair burden on the taxpayers.
- 10. The organization shall defend, indemnify and hold harmless the district for and in regard to any and all claims, injuries, losses, and/or liability occurring or arising out of the use of school facilities that is the subject of this application.

Proof of insurance and arrangements for a certified AED user shall be provided and fees paid prior to the use of the building.				
Applicant's Signature	Date			
Title within organization				