

STAFFORD COUNTY PUBLIC SCHOOLS – APPLICATION FOR COMMUNITY USE OF BUILDINGS, EQUIPMENT AND GROUNDS

INSTRUCTIONS:

1. All information must be furnished before application can be processed.
2. Fees for all known services and/or rental must be paid when filing the application.
3. Make check payable to the school.
4. Application must be filed with the school principal not less than ten (10) working days before intended use.

Organization _____ School Requested _____

Address _____ Date Application Filed _____

Contact Person _____ Office Phone _____

Address _____ Cell Phone _____

Date(s)/Times(s) of Activity _____

Type of Activity _____

Spaces Requested \$ ph: Auditorium (MS \$120, HS \$125) _____ Cafeteria/Multipurpose (ES \$95, MS \$120, HS \$125) _____ Gymnasium (\$95 ES, 120 MS, \$125 HS) _____ Kitchen _____ (only w cafeteria staff) Classroom (\$25) _____ Parking Lot (\$50) _____

Special Equipment Desired _____

Names of Performing Groups _____

Admission Charges (if none, so indicate) Adult \$ _____ Couple \$ _____ Children \$ _____

The undersigned and the above named organization, jointly and severally, agree to be responsible for the terms of this agreement, including payment of all fees, expenses, damages to premises and further agree to hold the Stafford County School Board, its agents, servants and employees harmless from any legal liability, injury or damage to any person or property in connection with the use of the school facility. The undersigned certifies that he/she is familiar with the rules and regulations of the Stafford County School Board for Community Use of School Facilities and that such rules and regulations will be enforced. The undersigned further acknowledges that the fees shown are estimated fees and that they are responsible for any changes that may be accessed due to the actual use of facilities, equipment, and personnel.

Name of Group/Organization _____ Signature of Contact Person _____ Position _____ Dated _____

Facility Rental Fee _____ x _____ hours = Total _____

Certificate of Insurance Attached _____

Personnel Fee(s):

Expiration Date _____

	Total Hours		Hourly Rate	Total Hours		Overtime Rate	Total
Supervision		x			x		
Custodial		x			x		
Security		x			x		
Technician		x			x		
School Nutrition		x			x		
Other(Specify)		x			x		
*FICA Taxes		x			x		
Estimate TOTAL		x			x		
Payment Rec'd		x			x		
BALANCE		x			x		

Following the activity, a facility/grounds inspection will occur. The renter is responsible for any damage or vandalism that did occur during the duration of the activity

*ALL PERSONNEL COMPENSATION x 7.65%

APPROVED BY: _____, Principal

APPROVED BY: _____, Executive Director of Operations