

**SMITH-GREEN COMMUNITY SCHOOLS**  
**222 WEST TULLEY STREET**  
**CHURUBUSCO, INDIANA 46723**

**APPLICATION FOR USE OF SCHOOL FACILITIES**

**WARNING**

Under Indiana law, a school is not liable for an injury to, or the death of, a participant in physical fitness activities at this location if the death or injury results from the inherent risks of the physical fitness activity.

Inherent risks of physical fitness activities include risks of injury inherent in exercise, the nature of a sport, the use of exercise equipment or the use of a facility provided by a school. Inherent risks also include the potential that you may act in a negligent manner that may contribute to your injury or death, or that other participants may act in a manner that may result in injury or death to you.

You are assuming the risk of participating in this physical fitness activity.

Building desired: \_\_\_\_\_ Date desired: \_\_\_\_\_

Person making application: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Purpose of meeting: \_\_\_\_\_

Arrival time: \_\_\_\_\_ Departure time: \_\_\_\_\_

Supervised by (if different than applicant): \_\_\_\_\_

Expected attendance: \_\_\_\_\_ Admission charge: \_\_\_\_\_ Building closed: \_\_\_\_\_

Be specific in what facility is requested: (Note: For set-up needed, complete Equipment Sheet.)

Auditorium       Gym       Cafeteria   
 Classroom(s)       Athletic Field(s)       Other  \_\_\_\_\_

**We have read and fully understand the Warning and Policy/Use of Facilities rules and regulations as they appear on the front and back of this form governing the use of these facilities and agree to abide by them and be responsible for any damage to school property due to such occupancy.**

Signature of person assuming rental responsibility \_\_\_\_\_ Date \_\_\_\_\_

The above request does not interfere with the educational program of the school. The use of the necessary facilities for the above date(s) has been scheduled subject to cancellation if a school function arises.

Building EC Treasurer \_\_\_\_\_ Tentative hold on space \_\_\_\_\_  
 (date(s) and time)

Principal \_\_\_\_\_ Approval \_\_\_\_\_ Denial \_\_\_\_\_

Superintendent or Designee \_\_\_\_\_ Approval \_\_\_\_\_ Denial \_\_\_\_\_

Group designated as group type# \_\_\_\_\_

Charge will be \_\_\_\_\_ If none, so state here \_\_\_\_\_

**Custodians: Please complete below and return form to Business Office.**

Arrival time: \_\_\_\_\_ Departure time: \_\_\_\_\_

Condition of facilities: \_\_\_\_\_

Custodian's signature: \_\_\_\_\_

## Guidelines and Fee Schedules

### Use of Facilities

All groups must submit a rental request form to the building principal for prior approval even if no rental charge or custodial fee is assessed:

Group #

- 1 Curricular, extracurricular and sporting activities of the School Corporation and organizations that raise money for the sole benefit of Smith-Green Community Schools students. Included are auxiliary organizations affiliated with schools such as, but not limited to, parent organizations and clubs. (Monday through Friday: 6:00 AM to 10:00 PM)
- 2 Non-school groups whose membership is primarily composed of students of the school district such as, but not limited to, AAU, Youth Leagues, Boy and Girl Scouts, 4-H, etc., requesting use of the facilities without charging admission. (Monday through Friday: 6:00 AM to 10:00 PM)
- 3 Non-school groups listed in Group 2 above requesting use of facilities on weekends or when custodial personnel are not normally on duty.
- 4 Individuals and community organizations requesting use of facilities on weekends or when custodial personnel are not normally on duty.
- 5 Groups which charge an admission for their programs.

#### Facility Costs

<i>Location</i>	<i>Group 1 or 2</i>	<i>Group 3</i>	<i>Group 4</i>	<i>Group 5</i>
Auditorium	NC	CU+	CU+\$50*	CU+\$100*
Cafeteria	NC	CU+	CU+\$15*	CU+\$30*
Gym	NC	CU+	CU+\$25*	CU+\$50*
Annex	NC	CU+	CU+\$15*	CU+\$30*
Classroom(s)	NC	CU+	CU+\$15*	CU+\$30*
Athletic Facilities	NC	CU+	CU+\$15*	CU+\$30*

Amount listed is for a ONE-HOUR block of time plus the cost of custodial services. Amount listed will be doubled if group is larger than 50 people.

When a facility is scheduled for pre-night set up or practice before a performance, etc., a per-night charge of \$50 will be assessed.

NC= No Charge

CU= Custodial service charge if applicable

CU+= Board approval required plus custodial service charges if applicable

\* = Insurance requirements – Lessor shall provide a current Certificate of Liability Insurance showing not less than \$1,000,000.00 Commercial General Liability Insurance – Each Occurrence limit; Smith-Green Community Schools shall be granted Additional Insured status.

## EQUIPMENT SHEET

Group/Organization \_\_\_\_\_

Date of Event: \_\_\_\_\_ Setup Completed By: \_\_\_\_\_

Contact Person Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

**SOUND NEEDS** (Fill in the number when you plan to use something. Check all that apply)

\_\_\_ Handheld Wireless Microphone(s)    \_\_\_ Monitors    \_\_\_ CD Cues/Music  
\_\_\_ Lapel Wireless Microphone(s)    \_\_\_ Microphone(s) with stands    \_\_\_ Other: \_\_\_\_\_

**LIGHTING NEEDS** (Basic lighting will be provided on stage. Check all that apply)

\_\_\_ Basic Lighting    \_\_\_ Spotlight (s)    \_\_\_ Spotlight on one speaker @ podium  
\_\_\_ Several Light Cues needed    \_\_\_ Other Specials, please explain: \_\_\_\_\_  
\_\_\_\_\_

**STAGE EQUIPMENT NEEDS** (Check all that apply)

\_\_\_ Podium with Microphone    \_\_\_ Risers (# Units needed \_\_\_\_\_)    \_\_\_ Riser Shells  
\_\_\_ Chairs (# Needed: \_\_\_\_\_)    \_\_\_ Music Stands (# Needed \_\_\_\_\_)    \_\_\_ Screen  
\_\_\_ Laptop    \_\_\_ Overhead Projector  
\_\_\_ Bleachers (in or out)    \_\_\_ Ext. Cords (# needed \_\_\_\_\_)

If you are providing your own stage equipment or settings, please explain what those are and how those will be set up: \_\_\_\_\_  
\_\_\_\_\_

**LOBBY NEEDS** (Check all that apply)

\_\_\_ Table(s) 6' (# needed \_\_\_\_\_)  
\_\_\_ Table(s) 8' (# needed \_\_\_\_\_)

Location of tables, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OFFICE USE ONLY:**

Copies to:

Business Office  
Building Principal

Applicant  
EC Treasurer

Custodian