



APPLICATION FOR COMMUNITY USE OF SCHOOL FACILITIES

The approval of the Principal or designate responsible for the site being rented is required for every Facility/Grounds Rental Contract.

1) TO BE COMPLETED BY THE APPLICANT:

SCHOOL REQUESTED: _____

AREAS, DATES AND TIMES REQUESTED:

Please be specific when indicating room or equipment – ie. Classroom A101, Gym, Library, Projector, Volleyball Net, etc.

REQUESTED DAY(S) REQUIRED AS: **Single Event (s)** **Weekly** **Monthly**

AREA(S) /EQUIPMENT	DAY	START DATE	START TIME / FINISH TIME		FINISH DATE
<i>(Example): Gym</i>	<i>Saturday</i>	<i>Sept 12, 2009</i>	<i>6:00pm</i>	<i>7:00pm</i>	<i>Sept 13, 2009</i>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Will Fees, Memberships, or Admission be Charged? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, how much?) \$ _____ per session	
Description of Use/Activity: _____ _____	Special Requirements: _____ _____
Is the Group a Registered Non-profit? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, you must provide registration number along with a copy of the certificate registering your group as non-profit)	

NAME OF RENTAL GROUP: _____

Name of Official in Charge: _____ Position with Group: _____ <small>(Official in charge and on site group leader must be 19 years of age or older.)</small>	On Site Group Leader: <small>(if different from official in charge)</small>
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Address:	City:	Province:	Postal Code:
Home Telephone:	Cellular Telephone:	Pager Number:	
Work Telephone:	Fax Number:	Email Address:	

EMERGENCY CONTACT PERSON: _____

Home Telephone:	Cellular Telephone:	Pager Number:
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2) TO BE COMPLETED BY THE PRINCIPAL (OR DESIGNATE):

ROOM RENTAL (Revenue to stay at the school)

Room, Equipment & Grounds Description:	# of Days	Rate	Total

School Total: _____

EXTRA STAFFING (Revenue to be forwarded to the School Board Office)

Extra Custodial or Other Time:	# of Hours	Rate	Total

District Total: _____

3) SIGNED BY:

RENTAL GROUP

SCHOOL PRINCIPAL OR DESIGNATE

_____ Signature

_____ Signature

_____ Print Name

_____ Print Name

By signing this application, the rental group understands that it is responsible for any damage to the school property. The school district Waiver Form (M.1B) must also be completed.

The rental group also agrees to abide by school district policy as posted at <http://www.sd8.bc.ca/policy.htm>

If the extra staffing portion of the agreement is completed, a copy of the signed document must be forwarded to the school board office.

School District No. 8 (Kootenay Lake)
570 Johnstone Road
Nelson, BC V1L 6J2

As users of the _____ (location), the renter recognize that it is responsible for its own liability insurance or will provide a waiver form.

WAIVER FORM

1. Indemnification and Hold Harmless Clause:

2.
The _____ (User Group) shall indemnify and hold harmless the School District and any of its officers, employees, servants, agents and contractors from any and all loss, liability, claims or expense arising out of the use and/or occupation of the property belonging to the School District by the _____ (User Group) and any of its officers, employees, servants, agents, contractor and volunteers, except to the extent that such loss arises from the negligence of the School District.

3.
The Board will not be responsible for any property left on the premises by the renter, its officers, employees, servants, agents, contractors, volunteers or members.

4.
The renter hereby agrees to waive all rights or subrogation or recourse against School District No. 8 (Kootenay Lake) with respect to the use or occupation by the renter of the premises described in this agreement.

I have read and understand the above-noted content in this Waiver.

Dated this _____ day of _____, 20_____.

SIGNATURE OF AUTHORIZED REPRESENTATIVE: _____
(must be over 19 years of age)

Name (please print): _____

Address: _____

City & PCode: _____

Phone: _____

School District Authorized Signature: _____

Date: _____