

**COMMUNITY USE OF DISTRICT FACILITIES**  
*(Application for Permit to Use District Facilities)*

The Gasconade County R-1 School District permits the use of district facilities by individuals and groups as defined in policy KG.

Applicants must supply all information requested on this form before the application can be processed. The completed application must be presented to the appropriate district personnel at least two weeks prior to the date requested for use. Fees, when applicable, must be paid one week prior to the date of requested use.

Date of Application: \_\_\_\_\_

**Group/Individual Information**

Name of Group or Individual: \_\_\_\_\_

Group or Individual Is:     G Governmental  
                                  G Nonprofit  
                                  G Other (Explain): \_\_\_\_\_

Board policy requires groups to designate a representative who is at least 21 years old and has the legal authority to bind the group contractually. Please provide the representative's contact information below. Individuals may sign for themselves if they are at least 21 years old.

Name of Representative/Individual: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Mobile Phone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**Use Request Information**

Type of Property Needed:

- |                   |                |                        |
|-------------------|----------------|------------------------|
| G Classroom       | G Gymnasium    | G Hallway              |
| G Auditorium      | G Playground   | G Pool                 |
| G Stadium*        | G Cafeteria    | G Lobby/Atrium         |
| G Athletic Field* | G Kitchen Area | G Library/Media Center |

FILE: KG-AF1  
Critical

Name of District Site (if requesting a specific site): \_\_\_\_\_

Date of Requested Use: \_\_\_\_\_

Time Building or Space is Needed: From \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Description and Purpose of Use (Please be specific.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Attendees Expected: \_\_\_\_\_

**Equipment**

Groups and individuals may use desks, chairs and tables located in the room or facility designated for the individual's or group's use, but otherwise a permit to use district facilities does not give permission for an individual or group to use district equipment, such as interactive whiteboards, computers, electronic equipment, projectors, kitchen appliances, scoreboards or athletic gear. The superintendent or designee may provide access to equipment at his or her discretion and may charge a fee or a security deposit for its use.

Please list any equipment needed: N/A \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Required Documentation**

Please attach the following documents to this application:

- ~~Documentation demonstrating nonprofit status~~
- Proof of insurance
- ~~Indemnity and hold harmless agreement~~
- ~~Applicable fees and deposits~~

**Signature**

I agree to pay the applicable fee(s) for the use of district facilities including, but not limited to, any required security deposits, personnel costs, equipment rental fees and insurance costs.

I understand that district equipment cannot be removed from district property. I agree to exercise care in protecting district equipment and to prevent damage to district equipment. In the event that damage to district property occurs, regardless of the cause, I agree to reimburse the district for the repair or replacement of the equipment at the district's discretion.

I understand that I am responsible for the actions of the group meeting, and I will arrive before the activity begins and remain until all participants leave.

\_\_\_\_\_  
Signature of Individual or Group Representative

\_\_\_\_\_  
Date

***For Office Use Only***

Request for use is:

**G** Granted as requested on this application.

**G** Granted with the following alterations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**G** Denied.  
\_\_\_\_\_

If the request is granted:

Indicate personnel needed and number of hours needed:

- \_\_\_\_\_ Supervisory Personnel
- \_\_\_\_\_ Custodians
- \_\_\_\_\_ Food Service Staff
- \_\_\_\_\_ Security Staff
- \_\_\_\_\_ Technicians
- \_\_\_\_\_ Other: \_\_\_\_\_

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Indicate fees and required deposits:

\$ \_\_\_\_\_ Facility Use Fee

\$ \_\_\_\_\_ Equipment Use Fee

\$ \_\_\_\_\_ Personnel Costs

\$ \_\_\_\_\_ Total Fee Due

\$ \_\_\_\_\_ Security Deposit Required to Hold Date

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Signature of Superintendent/Designee

Date

Users must have the signed copy of this approved request with them during facility use.

\* \* \* \* \*

***Note: The reader is encouraged to review policies and/or procedures for related information in this administrative area.***

Implemented:

Revised:

«AddressLine»