**Braymer C-4 Facility Request Form**

Please view the school calendar at [**http://www.braymerbobcats.org/vcalendar/**](http://www.braymerbobcats.org/vcalendar/) to check availability prior to submitting your request to the Activities Director.

**Note:** An organization and/or individual applying to use district facilities will need to sign an **Agreement for Use of Facility (Appendix A)** and mail agreement to 400 Bobcat Ave. Braymer, MO 64624 or Fax Agreement to: 660-645-2780. If you have questions regarding facility use, please contact the Braymer School Office, 400 Bobcat Ave. Braymer, MO 64624; Phone: 660-645-2284.

Requestor Name:

Requestor Email Address:

Event Title:

Date of Event: Number Attending:

If recurring, please list: Frequency: Last Date of Event:

Start Time of Event: End Time of Event:

Set Up Begin Time: Breakdown End Time:

Faculty Member Sponsor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employees Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If your organization **does not** have a Faculty Sponsor one will be assigned. An additional cost will be assessed

$ 25.00/hr. Name of assigned Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(Office Use Only)**

Employees Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please choose one of the following:

* Group has Liability Insurance (Copy of coverage must be presented)
* Hold Harmless and Indemnify Waiver + Refundable Security Deposit
* Will attain insurance with Gatherguard (https://gatherguard.com/ Id Code-4517-258)

Technology Services: \_\_\_\_\_\_ Projector Mic

Laptop Speakers

Screen Other:

Custodial Services: Bleachers Stage Setup

Climate Control Lunch Tables

Event Set up / Breakdown Other:

Location: **Braymer Schools**

Hometown Heroes Hall New Gym Library

Cafeteria Conference Room Class Room

SB Field Football Field Other

* Deposit may be required (Superintendent will determine) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Additional information that may be helpful:

**Appendix A**

**Braymer C-4 School District**

***General Conditions for Facility Use***

1. User agrees that the property and facilities of Braymer C-4 School District shall be used only for purposes that conform to, and in a manner consistent with, federal, state, and local law and the policies and procedures of the District and only for the purposes as described herein.
2. User agrees to abide by all fire, safety, traffic and parking, and public safety requirements of the District.
3. Smoking is not permitted in any District facility.
4. The sale, consumption or possession of alcoholic beverages shall not be permitted on District premises at anytime. Nor shall any person who is in a drunken or intoxicated condition, or who is under the influence of liquor, be permitted on District premises. The primary contact person above will be held responsible for the enforcement of this rule.
5. The use of profane language or gambling in any form is not permitted in any District facility.
6. No use of equipment shall be granted unless an instructor or attendant, approved by the District, is in charge of the rooms or equipment. User agrees to be responsible for any damage to District facilities and/or injury to other persons using the facility under this Agreement. User agrees to indemnify, defend and hold harmless Braymer C-4 School District, its board, administrators, employees, agents and volunteers from any and all claims, suits, actions and liability arising or alleged to arise out of injuries or damages sustained by any person as a result of the use of the District facility under this Agreement, not withstanding the negligence of Braymer C-4 School District, its board, administrators, employees, agents and volunteers. User agrees to provide the District proof of comprehensive general liability insurance of not less than $1,000.00 per occurrence, which names the District as an additional insured. The District reserves the right to cancel this Agreement if such proof of insurance is not provided at least two weeks prior to the scheduled use and maintained throughout the use. In the event acceptable proof of insurance cannot be provided by the user, the District can arrange for the procurement of special event insurance at [**https://tulip.onebeaconentertainment.com/e/tulip/apply.aspx**](https://tulip.onebeaconentertainment.com/e/tulip/apply.aspx)**.** The Braymer C4 School District Venue ID Code is: 4517-036. Questions can be directed to the District or our insurance provider at (800)507-8414.
7. Failure to abide by the terms of this Agreement may result in the immediate termination of the Agreement by the District.
8. Estimated fees must be paid at the time reservations are confirmed. Payment is to be made by check payable to Braymer C-4 School District and returned to the School District Office at least 7 calendar days prior to event. In the event additional costs are incurred, user will be notified of additional fees and will be required to submit payment for such fees.
9. Cancellations are accepted up to one week prior to the facility use. A full refund will be made unless the District has incurred costs in preparation for the use. Any refund would be reduced by those costs. No refund will be made for cancellations received less than one week prior to the use.
10. The District reserves the right to cancel this reservation if, in its sole discretion, it has reason to believe that the facility use will conflict with the General Conditions above. The District also reserves the right to change reservations to other rooms with the understanding that, if possible, comparable facilities will be provided.
11. Users of District facilities will abide by the General Conditions.
12. If the Districts assigns a Faculty Sponsor any payments will be made to the school and the school will then pay the employee.
13. **No unsupervised students/children will be allowed in the building**.  **Initial required.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Primary Contact Person Date

**Fax Agreement to Braymer C-4 School**

**Fax: 660-645-2780  
Phone: 660-645-2284**

Facilities Use Request Braymer C-4 School District

**FOR OFFICE USE ONLY**

Estimated deposit charge $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated other fees $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total amount of payment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of payment/received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notification sent to Building Administrator/Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval by Activities Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Approval by Superintendent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Payment Coded to:

$\_\_\_\_\_\_\_\_\_\_\_\_\_ 5191-Other Local Revenue

$\_\_\_\_\_\_\_\_\_\_\_\_\_ Total Rental Fees

Facilities Use Request Braymer C-4 School District

**Request Denied for the following:**