



CHARLES COUNTY PUBLIC SCHOOLS APPLICATION FOR USE OF JAMES E. RICHMOND SCIENCE CENTER FACILITIES

Application and Certificate of Liability Insurance must be submitted at least four weeks prior to the event.

Name of Organization/Group/Agency:											
Contact Person:						Title/Position:					
Address/City/State/Zip:											
E-mail Address:						Daytime Phone:					
JAMES E. RICHMOND SCIENCE CENTER				SPECIFIC St. CHARLES HIGH SCHOOL AREAS REQUESTED							
Digital Classroom (Dome Theater)				Auditorium				Lobby			
Inquiry / Discovery Lab (E120)				Cafeteria				Activity Area (rear of Auditorium)			
Science on A Sphere				Kitchen				TelePresence			
Equipment Requested (if applicable):											
Other:											
Purpose (specific details must be provided):											
										Estimated Attendance:	
Requested Dates of Use			Days of Week Requested							Hours Requested	
From	To	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	From (AM/PM)	To (AM/PM)	

USE OF FACILITY FEES: ALL APPLICABLE FEES MUST BE RECEIVED BY SCHOOL AT LEAST TWO WEEKS PRIOR TO EVENT

Area Requested	Base Fee (up to 6 hours)	# Hours applicable after minimum	Hourly rate after min. and/or set-up	Total Building Cost
Digital Classroom (Dome Theater)				
Science on A Sphere				
Lobby with Hands-on Interactives				
Inquiry / Discovery Lab (E120)				
Services Requested	# Needed	# Hours	Hourly rate	Total Services Cost
Building Services				
Cafeteria Services				
Setup Fees:	Security Fees:	Other Fees:		TOTAL FEES:

Applicants for use of school facilities are required to have commercial general liability insurance in the amount of \$1 million combined single limit for bodily injury and property damage. Board of Education of Charles County, its elected and appointed officials, employees, agents, and authorized volunteers (not an individual school's name) must be named as additional insured on the policy. If the organization has a paid worker on site during the proposed activity, proof of workers' compensation must also be provided. Applicant must acknowledge this requirement by initialing below.

A CERTIFICATE OF LIABILITY INSURANCE MUST BE SUBMITTED WITH THIS APPLICATION _____ (APPLICANT MUST INITIAL HERE)

The undersigned is a duly authorized representative of the above organization, assumes responsibility for the use of the facilities in accordance with the regulations governing their use, has reviewed and understands the information on the REVERSE side of this form, and agrees to pay Charles County Public Schools all expenses specified for this use. In case of any conflict with dates and/or times, the priority schedule explained in the CCPS "Use of School Facilities by Outside Organizations" brochure will determine the user. This application becomes null and void if the requesting organization wants to make any changes; a new application must be submitted and approved by BOTH the Director of the James E. Richmond Science Center AND the Assistant Superintendent of Supporting Services, and any applicable fees must be re-calculated and collected prior to the event. CCPS reserves the right at all times to revoke or annul any approved application for noncompliance with policy requirements or for any other reason in the best interest of the school system.

PRINTED NAME: _____
 APPLICANT'S SIGNATURE: _____ DATE OF APPLICATION: _____

CHARLES COUNTY PUBLIC SCHOOLS USE ONLY			
(All approvals/denials are NOT FINAL until signed by BOTH the Director/Designee AND the Assistant Superintendent of Supporting Services)			
APPROVED	DENIED	DIRECTOR / DESIGNEE:	DATE:
APPROVED	DENIED	ASSISTANT SUPERINTENDENT OF SUPPORTING SERVICES:	DATE:
COMMENTS (<i>reason for denial, etc.</i>):			RECEIVED CHECK #:
			AMOUNT:
			INITIALS: