COVINGTON EXEMPTED VILLAGE SCHOOLS REQUEST FOR USE OR RENTAL OF SCHOOL FACILITIES

Please check one: school organization co rate)	mmunity organization (see rental
Date submitted:	
Name of organization:	
Name of representative:	
Address of representative:	
Telephone #: Activity (be speci	lfic):
Date(s) of use: Hours of U	Jse:
FACILITIES REQUE	STED
Elementary Middle Scho	ool High School
Gymnasium and/or stage Concession Stand Locker Room and Shower Cafeteria	Kitchen Classroom(s) Athletic Field Other
Additional Comments or Information	
SERVICES REQUES	TED
Heat/Light Public Address System Furniture Set-up # tables # chairs	Traffic Control Custodian Service Trash Containers Mops/Brooms Other
THE FOLLOWING SPECIFIC CONDITIONS MUST EX PERMISSION TO USE SCHOOL FACILITI	
 Requests for the use of school facilities will be grawith the academic and extra-curricular programs sponsored by 2. Under no circumstances will a school building be open adult in charge of the activity. The responsible adult must or approved by the superintendent of schools. No group or member of a group will be permitted to end 	the school. Hed for use unless there is a responsible be an employee of the board of education

before the arrival or after the departure of the responsible adult in charge of the activity. 4. The organization using the school facilities will be responsible for the maintenance of order. The organization will be held responsible for any theft or damage which occurs during the activity.

5. Groups and individuals will be excluded from all parts of the school building except those specified in this agreement.

6. If a scheduled activity is canceled, it is the responsibility of the adult leader to contact the building principal or the superintendent of schools as soon as the fact is known.

7. Parent organizations affiliated with the school will be permitted to use school facilities free of charge.

8. As the duly appointed representative, I hereby hold harmless the Covington Board of Education from any liability as a result of accident or liability while using the facilities of the Covington Board of Education, and will ensure that the school facilities will be restored to their original condition after use.

Date received:	Date approved:	By:
Custodian time (if needed):	From	То
Cafeteria worker (if needed):	From	То
Copies to: Principal, Athletic Director, Custodian, Superintendent's Office		

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