

This permit authorizes the use of school facilities as listed. The person to whom this permit is issued agrees to accept responsibility for the care of the facility and the compliance with the USD 250 school board policy covering facility use by non-school groups. (Policy KG)		In order to process Facility Use Permit all information requested must be provided.
PLEASE INDICATE REQUEST:	☐ District Vehicle ☐ Hutchinson Field	
☐ Lakeside ☐ George Nettels ☐ W	/estside ☐Meadowlark ☐PCMS ☐PHS	<u>APPLICATION PROCESS</u>
☐ Staff Development 0	Center Bevan Education Center	1.Requester submits completed
Start Time: End Time:		form to school to receive building approval.
Date(s) Needed:	Day of Week:	
Estimated Attendance: Admission Charged: YES NO		2. School sends to the district office for approval.
Specific Rooms(s)/Vehicle(s) Needed: _		
Special Needs: (microphones, lecterns, tables, etc.)		3. District office contacts applicant to arrange payments.
Person to Whom Issued:		4. Form returned to requested building.
		5.40
Organization:		5. After event school provides any necessary feedback to the
	Email:	district.
CUSTODIAN FEE	COMMENTS:	
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DEPOSIT		
BALANCE DUE	*Payment is due when	request is approved.
Renters will be responsible for and will be school facilities.	be required to reimburse the school district for any damage to dis Insurance Required: ☐ YES ☐ NO	strict property as a result of using
insurance specifies "Damage to Rented F	m amount of \$500,000 naming <b>Pittsburg USD 250</b> as additional Premises" you must show a minimum \$500,000 for each occurrenticipants or other individuals during schedule events; nor does the organizations.	ice. Pittsburg USD 250 does not assume
This form must be signed by the person wh provisions and guidelines related to this agr	nom it is issued and presented by that person to the custodian on the reement.	he date(s) shown. Please read all the
I have read the FACILITY USE AGRFEEN	MENT and RULES and I agree that I will be responsible for full of	compliance with them.
Signature:	Date:	_Approval:
Comments:		
		USD 250 DISTRICT OFFICE
Building Administrator:	Date:	PYMT RECEIVED
District Administrator:	Date:	AMT:
THE USD 250 EMERGENCY CONTACT	DURING VOUR EVENT IS:	