

# Northeastern Local School District

## Application for Use of Building(s) and/or Grounds

The \_\_\_\_\_ hereby applies for  
Organization, Person, or Group

use of the following facility: \_\_\_\_\_  
Facility, Building, and/or Room

for the purpose of \_\_\_\_\_  
Description of Activity

on the following date(s) \_\_\_\_\_  
Minimum of Five (5) Day Notice

From \_\_\_\_\_ to \_\_\_\_\_  
Opening Time Closing Time

Will admission be charged for this event: Yes  No  Rental charge required if less than 50% of participants are district residents.

The majority of participants are district residents: Yes  No

I have attached a copy of insurance policy listing The Northeastern Local School District as "Additional Insured." **(REQUIRED)**

I understand that depending on activity, Custodial and/or Food Service charges may apply.

I understand that should inclement weather require snow removal or salting for ice, I will be responsible for a two (2) hour minimum custodian. Facilities may NOT be used without areas being treated.

**I hereby accept all responsibility inherent in this application according to Board of Education policy: This signed agreement holds the Northeastern Local School District and Northeastern Local District personnel harmless from any and all liabilities from injuries received by any participant(s) spectator(s) during this function.**

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

Name of Representative: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number of Representative: \_\_\_\_\_

Email Address of Representative: \_\_\_\_\_

Signature of Representative: \_\_\_\_\_

### OFFICE USE ONLY

Type of Organization:  School Organization  General Public

Copy of Board Policy 7510A was given to applicant: Yes  No

\$ \_\_\_\_\_ Building Rental: \$100 per day

\$ \_\_\_\_\_ Custodial Services: \$25/hr. for School Organizations - \$50/hr. for General Public - Minimum 2 hrs.

\$ \_\_\_\_\_ Kitchen Services: \$20/hr. for School Organizations - \$40/hr. for General Public - Minimum 2 hrs.

\$ \_\_\_\_\_ Total Payment: Payable to Northeastern Board of Education

Date: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Receipt Given by: \_\_\_\_\_

Approved: Yes  No  Approved by: \_\_\_\_\_

Copies to : Principal  Applicant  Treasurer  Superintendent