



Snoqualmie Valley School District 410

8001 Silva Avenue SE, PO Box 400, Snoqualmie WA 98065

Phone (425) 831-8000 FAX (425) 831-8040

MT SI HIGH SCHOOL DISTRICT ATHLETIC COMPLEX APPLICATION

- All applications must be turned in **ten (10) business days** prior to requested date.
- Your rental application is not approved until all administrative signatures and proper insurance forms are in place. You will be notified via e-mail.
- Facility availability/requests can be submitted via School Dude. To obtain access please contact Facilities: 425-831-8030. Dates will not be approved until application is approved and all paperwork is turned in.
- A Certificate of Liability Insurance is required for all rentals.
- The attached HEAD INURY compliance form must be returned with the rental packet for any activity involving Youth Sports.

Rental Fees Schedule (all rental applications must include a **\$15** processing fee)

	Group I	Group II	Group III	Group IV
<u>Mount Si High School Athletic Complex</u>				
Locker Rooms - Per Event	\$0.00	\$60.00	\$70.00	\$100.00
Running Track - Per Hour	\$0.00	\$45.00	\$70.00	\$150.00
Tennis Courts - Per Hour	\$0.00	\$20.00	\$40.00	\$60.00
Baseball Fields - Per Hour	\$0.00	\$50.00	\$75.00	\$135.00
Softball Fields - Per Hour	\$0.00	\$50.00	\$75.00	\$135.00
Stadium Field - Per Hour	\$0.00	\$50.00	\$75.00	\$150.00
Stadium Lights - Per Hour	\$0.00	\$30.00	\$30.00	\$30.00
Stadium Press Box - Per Hour	\$0.00	\$15.00	\$25.00	\$35.00
Stadium Ticket Booth - Per Event	\$0.00	\$15.00	\$20.00	\$25.00
Concession Stands - Per Hour	\$0.00	\$15.00	\$30.00	\$50.00

Employees (required for all rentals if rental occurs outside regular work hours)

	Regular	Overtime
Custodial - Per Hour	\$30.00	\$45.00
Maintenance-Per Hour	\$32.00	\$47.00
Grounds-Per Hour	\$30.00	\$45.00

Extensive Setup Fee

Any group requiring extensive setup and cleanup, or groups larger than 100 in attendance may be charged a setup fee

SNOQUALMIE VALLEY SCHOOL DISTRICT NO. 410
 PO BOX 400 - 8001 SILVA AVE SE - SNOQUALMIE WA 98065

DATE _____

**SUBMIT AT LEAST 10 BUSINESS DAYS IN ADVANCE OF REQUEST WITH \$15 NON-REFUNDABLE PROCESSING FEE TO DISTRICT OFFICE
 APPLICATION IS NOT APPROVED UNTIL BUSINESS OFFICE RETURNS SIGNED APPLICATION VIA EMAIL**

***** MT SI HIGH DISTRICT ATHLETIC COMPLEX FIELDS RENTAL APPLICATION*****

Applicant/Organization: _____ Contact Phone: _____

BILLING Address: _____ City-State-Zip _____

BILLING NAME (If different than above): _____

BILLING EMAIL: _____ EVENT CONTACT EMAIL: _____

Specific Area of Facility Requested: (Circle or X)

TRACK _____ STADIUM AND FIELD _____ TICKET BOOTH _____ CONCESSIONS _____ PRESS BOX/SCOREBOARD _____

TENNIS COURTS _____ BASEBALL/SOFTBALL FIELDS _____ (BATTING CAGES) _____

STADIUM LIGHTS _____ *(Please attach light schedule if needed)*

PURPOSE OF ACTIVITY _____

Type of Rental	Dates of Use	Hours of Use
<input type="radio"/> One Time	Date:	From To
<input type="radio"/> Weekly * (Attach Schedule)	*Start Date End Date M ___ T ___ W ___ TH ___ F ___ S ___ S ___	From To
<input type="radio"/> Long Term * (over 6 mo.)	*Start Date: End Date: M ___ T ___ W ___ TH ___ F ___ S ___ S ___	From To

* Must Attach Detailed Calendar or Spreadsheet of dates/times

CERTIFICATE OF INSURANCE: Must Be Attached **HEAD INJURY COMPLIANCE FORM:** Must Be Attached

Equipment Needed / Additional Comments: _____

Applicant/Organization shall **provide proof of general liability coverage** of no less than \$1 million dollars per occurrence. SVSD must be named as additional insured on said policy. Coverage shall not be cancelled or reduced without thirty (30) days written notice to the district. _____ (Applicant Initials)

Youth Sports Programs – Pursuant to H.B. 1824, the Applicant has read and agrees to fully comply with the State of Washington requirements for concussion and head injury education, prevention, and management. Access to facilities under this Agreement will not be granted until all requirements are complete and approved by SVSD and/or designee. **(Head Injury Form attached)** _____ (Applicant Initials)

Your signature acknowledges that you have read and understand SVSD Policies regarding facility rental (attached) and **commits to pay all fees associated with this rental**. Your signature further acknowledges that you are authorized to sign on behalf of the Applicant/Organization and that the Applicant/Organization agrees to protect, defend, indemnify, and **save harmless the District** and its officers and employees from any and all claims, liabilities, damages, or rights of action directly or indirectly growing out of the use of the premises covered by this permit. The Applicant/Organization further agrees to reimburse SVSD for any damage arising from the Applicant's use of said facility. _____ (Applicant Initials)

The Snoqualmie Valley School District complies with all federal and state statutes and regulations and does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal, and provides equal access to the Boy Scouts and other designated youth groups. This holds true for all district employment and student opportunities. Inquiries regarding compliance and/or grievance procedures may be directed to the school district's Title IX/RCW 28A.640 Officer and Section 504/ADA Coordinator, Nicole Fitch, P.O. Box 400, Snoqualmie, WA 98065, or phone 425-831-8015.

DISTRICT USE ONLY	NON-REFUNDABLE \$15
Field Use \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	Payment of processing fee is required in advance, and is non-refundable Date Received: _____ Received by: _____ Check #: _____ ----- USER CLASSIFICATION I – School Related <input type="radio"/> II – Youth Oriented <input type="radio"/> III – Adult Oriented <input type="radio"/> IV – Profit / Commercial <input type="radio"/>
Track Use \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Field Lights \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Press Box \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Ticket Booth \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Locker Rooms \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Tennis Courts \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
Staff \$ _____ x _____ = \$ _____ x _____ = _____ Rate Hours Total PER USE total hours TOTAL	
TOTAL ESTIMATED CHARGES \$ _____	

ATHLETIC COMPLEX RULES AND REGULATIONS (See Community Use Procedures)

- Entry or use of the Mt Si Athletic Complex without an approved permit is strictly prohibited.
- Only District Administrators/and or authorized participants are permitted on the fields and track.
- Profane language, boisterous behavior, or other objectionable demeanor is not permitted.
- State law prohibits the use of tobacco, illicit drugs or alcoholic products on school property.
- Only approved signs by the District are allowed inside the Athletic complex.
- Participants and officials must wear molded sole shoes or tennis shoes without metal cleats.
- Track spikes are limited to one quarter inch in length only and are limited to and for use on the track, runways, and high jump aprons.
- Only water is allowed on the synthetic turf. No glass containers allowed.
- The use of sharp objects or golf clubs on all surfaces is prohibited.
- Skate Boarding, Scooter, and Roller Blades are prohibited.
- No Animals are allowed on the Mt Si Athletic complex or campus (either with or without a leash).
- The use of Sunflower seeds, nuts, and other consumable product that requires discharge of its outer shell is strictly prohibited. If violated, a \$35 per hour clean up fee will be charged and the possible loss of future use of the facility.
- Substances which may stain the artificial turf or track must be kept outside of the playing area fence of the artificial turf and off the running surface of the track.
- Marking or painting on the track, turf or any of the facility playing surfaces is strictly prohibited. Moveable markers, such as cones, and hurdles are allowed upon receipt of permission from the district designee.
- There will be no batting warm-ups in the stadium, on the artificial turf, track or non-baseball/softball fields. Players are allowed in designated areas only.
- Burning materials of any kind are prohibited anywhere on the Mt Si Campus.
- Only authorized maintenance vehicles are allowed inside the Athletic complex.

Notes: All facilities are rented as is, any special set-up arrangements are subject to additional fees in addition to the basic fee. A Site Supervisor is required on all Mt Si High School Athletic Complex rentals and is included in rental fees unless otherwise noted. All utility costs including stadium field lights are not included in rental fees. All Custodial/Maintenance fees are not included in rental fees where applicable.

Applicant Signature _____ **Date** _____

Operations Director: _____ **Date:** _____

Business Office: _____ **Date:** _____



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SNOQUALMIE VALLEY SCHOOL DISTRICT

**Compliance Statement for HB 1824, Youth Sports – Head Injury Policies
(Attach to any building/facility use request form)**

_____, Requests the use of the _____
(Name of renting organization) (Site Name)

Snoqualmie Valley School District’s facilities for the **following dates:** _____

_____, a private non-profit youth sports group, verifies
(Name of renting organization)

All coaches, athletes, and their parents/guardians have complied with mandated policies for the **management of concussions and head injuries** as prescribed by HB 1824, Section 2 and **Sudden Cardiac Arrest Awareness** As prescribed by SB 5083, section 3.

Attached is a Proof of Insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State, covering any injury or damage with at least \$500,000 due to bodily injury or death of one person, or at least \$1,000,000 due to bodily injury or death of two or more persons.

Signed:

Representative of Private Non-Profit Youth Sports Group

Date

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Snoqualmie Valley

Public Schools