



RIVER VALLEY SCHOOL DISTRICT

102 School Lane • Blairsville, PA 15717 • Phone 724-459-5500 • Fax 724-459-9209

Facilities Use Request

The following form must be completed and returned to the school office no less than two (2) weeks prior to the date of use.

Please complete and return this application to the building principal. The individual making the request is responsible for seeing that conduct detrimental to the public interest or abuse of the building is not permitted. Certificate of insurance must be provided and all information completed before approval.

NOTE: All building usage requests MUST be submitted and approved at least two weeks prior to requested date. All late requests will be denied by the building level administrator.

PART I: REQUEST (To be completed by all requesters)

Building Requested: _____ Requested by: _____

Room/Area Requested: _____ Address: _____

Date to be used: _____ Phone: _____

Hours/Time: From: _____ To: _____ Estimated No. of Participants: _____

Type of Activity: _____ Will Admission Be Charged? _____

Name of responsible adult who will be in attendance: _____

Phone number of responsible adult who will be in attendance: _____

PART II: SECURITY/MAINTENANCE/OTHER SERVICES (Fees to be charged to the requesting organization or individual)

- Security or Police protection are requested. (Required for any event in excess of 30 persons)
{If needed, security police will be paid according to the prevailing rate.}
- Custodial services requested. (Required for any meeting held outside of normal school day)
{When there is not normally a custodian on duty, the custodian's fee will be time and one-half (1-1/2) of the custodian's hourly rate of pay.}
- Other services requested. List: _____

Rental fees will be charged according to School District policy.

PART III: IMPORTANT INFORMATION (Please read before submitting request)

General Rules:

1. Pay before you use the facilities.
2. No smoking or tobacco chewing. Our schools are smoke free and tobacco free.
3. No food or beverages are to be served in areas other than the cafeteria and the multipurpose room unless authorized by the building principal.
4. Alcoholic beverages, narcotics and controlled substances are prohibited at all times.
5. Toddlers and young children must not be left unattended.
6. A responsible adult must be in charge and must be present throughout the activity.
7. The building must be left in such a manner that the custodian will only need to sweep.
8. The building must be closed by 11:00 p.m.
9. Hard shoes are not permitted on gym floors.
10. Participants may not enter the building until the stated time and must be out of the building at the contracted time.
11. Repair of damaged property or equipment will be charged back to the responsible individual/organization.
12. Groups are restricted to the areas specifically requested.
13. Any charges for setting off the fire alarm system will be borne by the renter.
14. Security/police must be provided for all evening activities, unless exempt by the building principal. Prior to the activity, check with the building principal to determine the number of security police required.
15. Computer labs are prohibited from use by profitmaking individuals or organizations.
16. If kitchen equipment is to be used, a District cook must be present and paid by the renting organization.
17. Sunday use is prohibited except by special Board authorization.
18. When school is cancelled or dismissed early for any reason, all activities are cancelled unless authorized by the Superintendent.

By signing below, I acknowledge that I have read all information contained on this form. I also realize that I, or my organization, may be charged for services required. I also acknowledge that fees may be charged for any excess service time or damages caused by myself or my organization.

Signature of Person Making Request

Date

PART IV: APPROVAL / NOTIFICATION CHECKLIST: (To be completed by building principal and copies distributed)

- | | |
|---|---|
| <input type="checkbox"/> Central Office | <input type="checkbox"/> Auditorium Manager (For Auditorium Requests) |
| <input type="checkbox"/> Athletic Director | <input type="checkbox"/> HPE Department (For Gym Requests) |
| <input type="checkbox"/> Maintenance Staff | <input type="checkbox"/> Cafeteria (For Cafeteria Requests) |
| <input type="checkbox"/> Schools being used | <input type="checkbox"/> Classroom Teacher(s): _____ |
| | <input type="checkbox"/> Request Calendar has been updated |

Building Principal Approval

Date

Superintendent Approval (if required)

Date

FOR OFFICE USE

Total Security Charges: \$ _____
 Total Custodial Charges: \$ _____
 Total Other Charges: \$ _____
 Total Owed: \$ _____

 Amount Paid: \$ _____
 Method: _____ Date Paid: _____
 Please make checks and money orders payable to:
 River Valley School District

FOR CUSTODIAL USE

Please fill in and return the form to the building principal.

 Was the building left in a reasonably clean condition? YES NO

 Time opened: _____ Time closed: _____
 Total custodian hours: _____
 Signature of Custodian: _____