

Miller Place Union Free School District

Miller Place, New York 11764

7000-E.2

Board of Education Policy

APPLICATION FOR PUBLIC USE OF SCHOOL FACILITIES

Submit to: Miller Place Facilities Use
 7 Memorial Drive, Miller Place, NY 11764
 (631) 474-2700 ext. 727
 facilitiesuse@millerplace.k12.ny.us
 fax (631) 331-8832

Organization Name: _____ **Purpose:** _____

Applicant's Name: _____ **Phone:** _____

Address: _____ **E-mail:** _____

Facility Requested	# Of Attendees	Date(s)	Time
Special Requests:			

Admission Charge / Participation Fee \$ _____ Proceeds used for: _____
 My signature below certifies that I have received, read, and understand copies of Board policies 1530 and 7000, as well as section XIV of policy 5310.04.

REQUIRED - A current, accurate, complete roster with home address, school district, and grade(if applicable) of active members in good standing in our organization is attached and evidences our status as a:

Miller Place School District Community Group Non-Miller Place School District Community Group

If this application is granted and a permit issued, we agree to comply with all the rules and regulations of the Board of Education governing the use of school Facilities; not to deny to any person participation in the use of school facilities on the grounds of race, color, creed, religion, national origin, gender, age, marital status, or disability; to take the utmost care in the use of school property; to provide adequate adult supervision at all times; and to make good any and all claims, damages, or causes of action for damages arising from our use of school facilities and will indemnify the school district facilities. Non-compliance of said policies, rules and regulations will result in immediate revocation of this permit and immediate dismissal from school district premises.

Date: _____ **Applicant's Signature:** _____

Athletic Director's Signature*: _____ **Principal's Signature:** _____

PERMIT FOR PUBLIC USE OF SCHOOL FACILITIES

*** This section to be completed by Miller Place School District Designee****

Organization			
Permit Holder		Insurance	Yes or Not Applicable
Facility		Roster Received	Yes or Not Applicable
Date(s)		Time	

ACCEPTED _____ **DENIED** _____

COMMENTS _____

This permit is valid only when signed by the Superintendent of Schools or Designee and then only as specified above. The permit holder must carry this permit and a photo I.D. on his/her person at all times while on school district property and must show this permit and photo I.D. to any and every school district employee upon request.

Date: _____ Signature: _____, Designee

Adopted:

Reviewed: 01/27/2010 11/18/2015 04/17/2019 07/03/2023

Revised: 08/12/2002 11/14/2003 12/14/2005 02/24/2010 12/09/2015 05/29/2019 08/23/2023