



PSJA ISD Facility Use Application

This application incorporates all of the terms and conditions of the Agreement for Use of PSJA ISD Facilities and any Addendum thereto.

This form supersedes all previous forms and is effective May 30, 2013

DATE OF SUBMITTAL: _____ **EVENT TITLE:** _____
EVENT DESCRIPTION: _____

LOCATION(S): _____ **ROOM/FACILITY:** _____

EVENT DATE(S): _____ **START TIME:** _____ **END TIME:** _____
(For additional dates, please attach Supplemental Event Form)

ORGANIZATION: _____

Check one NON-PROFIT FOR PROFIT

All non-profit organizations must include notarized **Non-Profit Charitable Organization Exemption Form** along with this application with this application.

CONTACT NAME: _____ **EMAIL:** _____

DAY PHONE: _____ **CELL PHONE:** _____

BILLING ADDRESS: _____ **PHYSICAL ADDRESS:** _____

INSURANCE INFORMATION

COMPANY: _____ **POLICY NO.:** _____

COVERAGE: _____ **COVERAGE DATES:** _____ **TO** _____

SET UP (check all that apply) Audio/Video Add'l Electrical Food
 Event Set-Up (Tables/Chairs) Lights/Sound Security **NUMBER ATTENDING** _____
 Other: _____

APPLICANT SIGNATURE

I have read, understand, and agree to all provisions of the Pharr-San Juan-Alamo ISD Facility Use Agreement and Addendum thereto, if applicable. On behalf of and as an authorized representative of the above named organization (applicant/lessee), it agrees to abide by the Agreement and any Addendum thereto; PSJA ISD Policy GKD (Legal) and GKD (Local); and all applicable laws and rules.

Print name of authorized representative and /or organization officer. *Date*

Signature *Signature of School Official or Appointed Designee for Approval*

FOR OFFICE USE ONLY: This application is accompanied by current Certificate of Insurance: _____
Non-Profit Charitable Organization Exemption Form: _____
7/16/12