

Facility Use Accounting Worksheet – Campus: _____

Please keep in campus or department office for documentation along with facility use agreement.

Facility Rented to (individual or organization) _____

Facility Rental Date _____

Hours of Rental – from _____ to _____

- A. Total hours of rental _____
 - B. User type (See GKD-R Exhibit) _____
 - C. Area to be rented _____
 - D. Hourly Rental Fee (See GKD-R Exhibit) \$_____ per hour **OR**
Flat Rental Fee (Outdoor Stadium) (See GKD-R Exhibit) \$ _____
 - E. Rental Cost Sub-Total (#of Hours x Hourly or Flat Rental Fee) \$ _____
 - F. KISD Employees required (at least one) _____ x \$30 x _____ hours = \$ _____
 - G. Clean-up Fee of \$300 for use of Antler Stadium or Tivy Athletic Complex
 - H. Stadium Lights (if needed) \$150 x _____ hours = \$ _____
 - I. Video Display - Contact the Public Relations Specialist for availability
Events (See GKD-R Exhibit):
\$_____ (for four hours) + additional hours _____ x \$150 = \$ _____
UIL Activities, Playoff Games, Games and Tournaments (See GKD-R Exhibit):
\$_____ (for four hours) + additional hours _____ x \$250 = \$ _____
- Total Rental Fee (Line E + F + G+H) = \$ _____

Checklist:

- 1. Facility Use Agreement signed on (date) _____
- 2. Proof of Liability Insurance acquired on (date) _____
- 3. \$100 deposit collected on (date) _____
- 4. Security deposit for Video Display (50% of estimated fees) (date) _____
- 5. Rental Fee Collected on (date) _____
- 6. Rental Fee deposited into account number **199 00 5743 01 000 0 00 000** on
(date) _____
- 7. \$100 deposit not refunded / refunded (circle one) on (date) _____
If not refunded, deposit into account number **199 00 5743 01 000 0 00 000** and explain
why it was not refunded:

Campus Secretary _____ Date: _____

Campus Principal _____ Date: _____