

APPLICATION FOR USE OF BUILDING

_____ of _____ herewith seeks permission to use _____ school building on _____ between the hours of _____ and _____ .M.

of Participants/Spectators: _____ # of Tables/Chairs Needed: _____ Who will setup? Client _____ FPS _____

Concessions: Y N Non-Profit 501(c)3: Y N Admission Charged: Y N Fee Charged for Participation? Y N

Fund 61 Account (if applicable): _____

Purpose of Rental including Group Participants: _____

If such permission is granted, we agree to the following conditions:

- 1. Use shall be limited to the following areas: _____
2. We shall assume and pay to the Fargo Public Schools the cost of replacing or repairing any damage to school property or equipment occasioned by our use of the building.
3. We agree to hold harmless and indemnify the Fargo Public Schools, its members, officers and employees, from and against any and all claims, loss, damage, expense and liability for injuries to persons and property, claimed or alleged to be caused for any reason while the above premises are used and occupied by us.
4. Any organization using school property shall comply with the sex offender on school property provisions contained in NDCC 12.1-32-15, NDCC 12.1-20, and AP 3435/7435. Use of weapons, tobacco and liquor shall be strictly prohibited.
5. Adult supervision must be provided during entire time of contracted use and, upon request, our organization will provide the school district a certificate of insurance documenting liability coverage with limits of no less than \$500,000.
6. Kitchen use: Complete and include the Application for Use of Kitchen.
7. Swimming pool use: We agree to have a certified lifeguard in attendance at all times at the swimming pool during the time we are using the pool in compliance with AP 3512.5512. Fargo Public Schools does not furnish towels.
8. We agree to make full payment prior to usage unless other arrangements are made.
9. We shall comply with all terms and conditions of Board of Education Policy #3510 – Community Use of School Facilities.

Requested by: _____ (Authorized Officer, Title)

Organization: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____

E-mail: _____

Signature: _____

Date: _____

Return this form to Fargo Public Schools District Office 700 7th Street South, Fargo, ND 58103 fax to 701-446-1200 or email to mooreka@fargo.k12.nd.us