

**WESTFIELD WASHINGTON SCHOOLS**

19500 Tomlinson Road , Suite B, Westfield, IN 46074

**PERMIT FOR USE OF SCHOOL FACILITIES**

*ALL REQUESTS ARE TO BE SUBMITTED AT LEAST 2 WEEKS PRIOR TO USE.*

*\*SUNDAY & HOLIDAY USE REQUESTS MUST BE SUBMITTED 45 DAYS PRIOR TO USE.*

TODAY'S DATE: \_\_\_\_\_ ORGANIZATION: \_\_\_\_\_

BUILDING REQUESTED: \_\_\_\_\_ AREA/ROOM: \_\_\_\_\_

The Westfield High School Auditorium Request Form should be submitted to the Auditorium Director for auditorium events.

EVENT: \_\_\_\_\_

DATE(S): \_\_\_\_\_ HOURS: \_\_\_\_\_ BLDG. OPEN TIME: \_\_\_\_\_

WHAT ENTRANCE SHOULD BE UNLOCKED: \_\_\_\_\_ (K-4 Bldgs. available at 6:15 PM during school year)

ADMISSION CHARGED: YES \_\_\_\_\_ NO \_\_\_\_\_ APPROX. ATTENDANCE: \_\_\_\_\_

**\*PLEASE NOTE: If schools are closed due to weather or an emergency, the facility will not be open.**

Specify in as much detail as possible what will be required for the event. Attach a drawing of layout if necessary.

Please mark the Facilities Needed:

Coat Racks \_\_\_\_\_  Number of Tables \_\_\_\_\_  Number of Chairs \_\_\_\_\_  Trash Cans \_\_\_\_\_

Podium  Bleacher Sections  Scoreboard  Goals  Mic  Projector

Screen  Other \_\_\_\_\_  PC (windows) WWS runs windows \*Mac requires a VGA adapter

**\*Please contact specific building Technology Coordinator for your technology needs**

A Certificate of Liability Insurance in the amount of \$2,000,000 property damage per occurrence and \$2,000,000 bodily injury per occurrence naming Westfield Washington Schools as additional insured required. Certificate must be on file prior to event. In addition, the User(s) undertakes and agrees to indemnify and hold harmless Westfield Washington Schools, The Board of School Trustees, Board elected and appointed officials, administrators, principals, teachers and all other school employees, volunteers or representatives, and all persons and bodies corporate acting for or on behalf of them, against all liability, claims, demands, actions, suits, damages, proceedings, costs and expenses (including reasonable attorney fees) whatsoever (including injury to persons and damage to property) for which they may be or become liable directly or indirectly arising out of the use of School premises by the User(s) (or the servants, agents, or invitees of the User(s)), and for such further sums in excess of those contained in any insurance policy procured by User(s) relating to the use of the School premises for such amounts as may not be payable under any such insurance policy.

A signed Permit For Use of School Facilities form must be on file to confirm scheduling of your event.

*The undersigned has read this Policy and application and accepts all the conditions contained herein:*

\_\_\_\_\_  
PRINTED NAME OF REPRESENTATIVE

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
SIGNATURE OF REPRESENTATIVE

\_\_\_\_\_  
CITY/STATE ZIP

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
PHONE

ALTERNATE NAME & PHONE NUMBER \_\_\_\_\_

PLEASE MAKE CHECKS PAYABLE TO: **WESTFIELD WASHINGTON SCHOOLS**

***FOR OFFICE USE ONLY*** FEE INFORMATION *(Auditorium & Kitchen fees will be invoiced separately.)*

Facilities Scheduler \_\_\_\_\_ Rental Fee \$ \_\_\_\_\_

Superintendent or Designee \_\_\_\_\_ Custodial Fee \$ \_\_\_\_\_

Date \_\_\_\_\_ Deposit Fee \$ \_\_\_\_\_