



Westport Community Schools
17 Main Road, Westport, MA, 02790-4202

APPLICATION FOR USE OF SCHOOL BUILDINGS AND GROUNDS
[Please Print Legibly – Black Ink Only]

ORGANIZATION _____ Non-Profit Status (501(c)3) ()

ADDRESS _____

PHONE (Day) _____ (Evening) _____

DAY(S) AND DATE(S) REQUESTED: _____

BUILDING _____ AREA(S) _____ HOURS OF USE _____

TYPE OF ACTIVITY _____

ADMISSION FEE _____ PROJECTED ATTENDANCE _____

SPECIAL EQUIPMENT REQUIRED? () YES () NO

DESCRIBE _____

No alterations of school grounds/buildings shall take place unless specifically authorized.

In requesting the use of school facilities, I agree to indemnify, hold harmless, and defend the Town of Westport and its agents and employees from all suits and actions, including attorneys' fees and all costs of litigation and judgments of every name and description brought against the Town as a result of loss, damage or injury to person or property by reason of any act or failure to act through my participation. You must submit a copy of a certificate of insurance with the minimum requirements of insurance and listing the Town of Westport as an Additional Insured:

Comprehensive General Liability	\$1,000,000
Auto Bodily Injury	\$1,000,000
Property Damage	\$1,000,000
Workmen's Compensation & Statutory	\$100,000

Furthermore, I have read the School Committee policies printed on the reverse side of this form and understand the requirements of those policies.

Liability Coverage Attached () Yes () No Non-Profit Status Attached () Yes () No

Signature of Representative _____ Print Name _____ Date _____
For Office Use

PRINCIPAL APPROVAL _____ DISTRICT OFFICE APPROVAL _____

Projected Charges: (Bill will be mailed within five (5) days of event)	
Custodial Staff No.: _____	Projected billable custodial hours: _____ Rate: _____
Food Service Staff No.: _____	Projected billable food service hours: _____ Rate: _____
Technology Staff No.: _____	Projected billable technology hours _____ Rate: _____
Lights/Sound Staff No.: _____	Projected billable lights/sound hours _____ Rate: _____
Police Detail: _____	Building User Fee: _____
Total Projected Charges: _____	