

Matthew W. Stover, Ed.D.  
Superintendent



Lee Miller  
Asst. Superintendent  
Curriculum & Instruction

Rae Thompson  
Asst. Superintendent  
Human Resources

Dan K. Moore  
Asst. Superintendent  
Operations

## FACILITY USE AGREEMENT/APPLICATION

*This application incorporates all of the terms and conditions of the Agreement for Use Of Catawba County Schools Facilities and any Addendum thereto.*

This form supersedes all previous forms and is effective June 1, 2021

DATE OF SUBMITTAL: \_\_\_\_\_ EVENT TITLE: \_\_\_\_\_

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

LOCATION(S): \_\_\_\_\_ ROOM/FACILITY: \_\_\_\_\_

EVENT DATE(S): \_\_\_\_\_ START TIME: \_\_\_\_\_ END TIME: \_\_\_\_\_  
(For additional dates, please attach separate sheet)

ORGANIZATION: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DAY PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_ PHYSICAL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### INSURANCE INFORMATION

COMPANY: \_\_\_\_\_ POLICY NO.: \_\_\_\_\_

COVERAGE: \_\_\_\_\_ COVERAGE DATES: \_\_\_\_\_ TO \_\_\_\_\_

SET UP (circle all that apply)    Audio/Video    Add'l Electrical    Food    Event Set-Up (Tables/Chairs)

Lights/Sound    Security    NUMBER ATTENDING \_\_\_\_\_

### APPLICANT SIGNATURE

I have read, understand, and agree to all provisions of the Catawba County Schools 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; Catawba County Schools Policy; 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: \_\_\_\_\_