

Date received request _____

COMMUNITY USE OF SCHOOL FACILITIES AGREEMENT

The Walnut Bend Independent School District (hereinafter District), agrees to let

_____ (Hereinafter Lessee), use the
(individual, group, or organization)

Walnut Bend ISD Elementary School Building and Grounds at 47 CR 198, Gainesville, TX 76240

_____, 20____, between the hours of _____ and _____ subject to the
(date)s

following conditions:

1. That the Lessee pays \$_____ and \$_____. (office use only)
(rental charge) (deposit)
The deposit is (nonrefundable/refundable if premises are left in a condition satisfactory to the Superintendent or designee). Payment must be made to the Superintendent's office, 14 days in advance of the use of the facility.
2. That Lessee will pay any charges provided in Board policy and/or administrative regulations on facility use for school personnel needed in connection with its use of the facility.
3. That the Lessee shall use the facility only for the purposes of :
4. That the District assumes no responsibility for maintaining or improving the facility and makes no representation about its safety or suitability for intended use.
5. That the District may revoke its permission to use the facility at any time or under any circumstances that the District may deem sufficient.
6. That the Lessee accepts full responsibility for protecting school property and equipment and assume any and all liability for repairs or replacement or for any damage done to buildings, equipment, or other school property used by the Lessee. Lessee also assumes full responsibility for the conduct of any and all persons using the facility during the rental.
7. That the Lessee agrees to assume all liability and hold harmless and indemnify the District, its Trustees, employees, and agents from any and all liability arising out of the Lessee's use of District facilities.
8. That Lessee shall furnish evidence of liability insurance coverage for the event and shall name the District as an additional insured on the policy.

Executed on this _____ day of _____, 20____.

Name _____

Superintendent _____

Position _____

Organization _____

Lessee _____

Email address _____

Phone Number _____

Address _____

COPIES TO: _____

- Their will a \$50.00 charge if the **Facility** is not cleaned appropriately. _____ **initial**

REQUEST FOR FACILITY USAGE

Date _____

Person making request _____

Organization: _____

Facility wanted: _____

Dates: _____ Time: _____

Dates: _____ Time: _____

Dates: _____ Time: _____

Dates: _____ Time: _____

School contact (person taking information) _____

Christy Clark contacted: Date: _____ By: _____

Posted to calendar: Date: _____ By: _____

NOTES: _____
