



EPHRATA SCHOOL DISTRICT NO. 165

111 4th Ave NW Ephrata WA 98823 | Phone: (509) 754-2474 | Fax: (509) 754-4712
 info@ephrataschools.org | EphrataSchools.org | Ken Murray, Superintendent

WE EXIST FOR KIDS & LEARNING

Facility Use Request

This application will be confirmed or denied within seven days. Please submit at least seven days prior to the date(s) desired.

Regulations

- Use of tobacco or either use or possession of alcohol or drugs on school district property is prohibited.
- **NO FOOD** allowed except in specified areas.
- Ephrata FIRE and POLICE Departments must be notified by the renter if LARGE CROWDS are expected.
- Renter is responsible to the BOARD OF EDUCATION for supervision, use and care of school property, and the character and nature of the activity will comply with school board regulations. **ALL GROUPS MUST HAVE ADULT SUPERVISION (AGE 21 OR OLDER) WHILE PARTICIPANTS ARE ON SCHOOL PROPERTY.**
- **Renter is responsible for ensuring participants remain ONLY in the site of the building being rented.**
- The school district reserves the right to require a usage fee and/or a damage/clean-up deposit. PAID IN ADVANCE.
- Renter is responsible for a custodial fee if a facility needs cleaning after use.
- **Insurance certificates and/or a minimum fee are required of any group using school facilities. PAID IN ADVANCE.**
- A "Hold Harmless Statement" must be signed by all adult sponsors of youth groups or by all adults participating in recreational group activity.
- Pre and post facilities inspections, conducted by the building principal or designee, may be required by the district.

Group Making Request	Today's Date
Name of Group Representative	Phone number
Mailing Address	City, State, Zip
Purpose of Use	Number of Supervisors / Number in Attendance

Date of Use	Time: From – To	Time Main Doors Open	Admission Charge

Single Rooms / <i>Note Building</i>		Middle School Gym	
Performing Arts Center (PAC)		Middle School Lunchroom	
Sound System/Lighting Technician- HOURLY RATE		Columbia Ridge Gym	
Kitchen / <i>Note Building</i>		Grant Gym	
High School Gym (NEW - OLD - circle one)		Beezley Gym	
High School Commons		Parkway Gym	
Public Address System		Library AV Equipment	
Folding Chairs		<i>Other Items Needed:</i>	
Folding Tables			

USE OF SPORTS FACILITY (specify) **Basketball** **Baseball** **Softball** **Soccer** **Football**
 Wrestling **Volleyball**

REQUIRED SIGNED COMPLIANCE STATEMENT ATTACHED FOR YOUTH SPORTS-HEAD INJURY POLICY HB1824

SPECIAL CONDITIONS OR SERVICES REQUESTED:

TO BE COMPLETED BY SCHOOL DISTRICT

Date Application _____ Confirmed Reason if Rejected _____

Special Conditions: _____

Superintendent /Designee Policy 4260 Adopted 9/24/00

INSURANCE CERTIFICATE REQUIRED

NAMING EPHRATA SCHOOL DISTRICT ADDITIONAL INSURED

COPY SENT TO:

ATHLETIC DIRECTOR

MAINTENANCE DIRECTOR

BUILDING CUSTODIAN

BUILDING PRINCIPAL



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Hold Harmless and Insurance Clauses for Rental Agreements for the Use of School Facilities

Special Insurance Requirements, if Applicable

The Renter, _____
 Agrees to indemnify and hold harmless Ephrata School District No. 165, its appointed and elected officials and employees while acting within the scope of their duties as such, from and against all claims, demands, loss, liability of any kind and character, including costs of defense, arising out of or in any way connected with the Renter's use of the school facilities specified in this Agreement except to the extent such claims, demands, loss, liability of any kind and character, including cost of defense arise out of the actions, inactions and / or negligence of Ephrata School District No. 165 and / or its appointed and / or elected officials, agents and / or employees. **This form should be signed and returned to the Superintendent, Ephrata School District No. 165, prior to any use by the renter of school facilities by this agreement.**

Signature of Applicant: _____ Title: _____

Facility Requested: _____ Date of Use: _____

Ephrata School District Fee Schedule (Adopted 9/26/2000)

	School Sponsored Programs Community Service	Community Use	For Profit
CLASSROOM	No charge during normal hours	\$20 for 1-4 hours use	\$40 for 1-4 hours use
GYM	No charge during normal hours	\$75 for 1-4 hours use \$100 for 8 hour use NO OVERNIGHT USE	\$150 for 1-4 hour use \$200 for 8 hour use NO OVERNIGHT USE
PERFORMING ART CENTER	No charge during normal hours Technical Staff, if needed, are to receive payment for services to outside groups	\$75 for 1-4 hours use \$100 for 8 hour use NO OVERNIGHT USE	\$150 for 1-4 hour use \$200 for 8 hour use NO OVERNIGHT USE
FIELD LIGHTS	Actual Costs	Actual Costs	Actual Costs
KITCHEN	\$25 + staff salary for 1-4 hours \$50 + staff salary for meal prep \$100 + staff salary for full day	\$25 + staff salary for 1-4 hours \$50 + staff salary for meal prep \$100 + staff salary for full day	\$50 + staff salary for 1-4 hours \$100 + staff salary for meal prep \$200 + staff salary for full day
HIGH SCHOOL COMMONS	No charge during normal hours	\$50 for 1-4 hours use \$75 for 8 hour use	\$100 for 1-4 hours use \$150 for 8 hour use
MIDDLE SCHOOL LUNCHROOM	No charge during normal hours	\$40 for 1-4 hours use \$60 for 8 hour use	\$80 for 1-4 hours use \$120 for 8 hour use

Normal Hours: The hours district custodial staff normally work. If any of the above require added staff time, \$22 per hour will be added.

Program / Group Definitions:

- School Sponsored Programs Activity identified as part of the General or ASB Fund operation.
- Community Service Any activity sponsored by a non-profit incorporated group residing with the Ephrata School District
- Community Use Any activity sponsored by a person or group for their community such as (but not limited to): Workshops and public meetings where no admission or donation is accepted. The Ephrata School District does rent facilities for private use. Technical staff required must be paid for their services.
- For Profit: Any activity that is sponsored by a person or group with the intent of raising money.



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Compliance Statement for HB 1824 Youth Sports-Head Injury Policies (attach to building / facility use request form)

_____ (group name)

requests the use of (facility name) _____

for the following dates: _____

_____ a private non-profit youth sports group, verifies all coaches, athletes and their parent/guardian have complied with mandated policies for the management of concussions and head injuries as prescribed by HB 1824, section 2.

Attached is a proof of insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least \$50,000 due to bodily injury or death to one person and at least \$100,000 due to bodily injury or death to two or more persons.

Signed,

Representative of Private Non-Profit Youth Sports Group

Date

Note: Access to school facilities may not be granted until all requirements of this application are complete and approved by the school district and/or designee.