## **Stillwater Township Board of Education**

## **FACILITY USE APPLICATION**

1.	Submission Date:						
2,	Any extra costs as per schedule below will be borne by user.						
	a)	Maintenance/Custodial					
	b) c)	Security Officer fee- \$_	/hour	aializad narsan	nel - \$ event/ per system		
	d)	Any moving, setup, etc	system use requiring spe- ., will be provided by use	er or will pay co	osts incurred by the BOE	(III	
	e)						
3.	Ind	ividual making request:			<del> </del>		
	Add	ress:					
	Phone number:			EMAII	L:		
4.	Information:						
	a)	Area(s)/Room(s) requested:					
	b)	Any Equipment/Services needed:					
	c)	Date(s):	approximate nu	umber of peopl	e attending		
	d)	Event & Activities Planned:					
	Sponsoring organization:						
	e)	Hours of use:					
	f)	Will this request requir	e any services (as per #2)	or specialized	use? Yes No		
	g) h)	A conference with School Officials may be required for all uses and fee assessment.  Please forward Summary of events and any promotional documents with this application.					
	mu bef obl sho Bo (in: Sti har Wi of: Al	st be named as an addition or the facility is used. Fat igation to provide the instruction be graded of Education against a cluding but not limited to allwater Board of Education mless and indemnity agree the respect to use of the fat Education's policy on comply with this policy for	al insured on this policy. illure to enforce the requir rance as aforesaid. In a nted, user will indemnify my and all demands, clain attorneys fees) to the fullen, the insurance certificate ement included in this paracilities for any athletic necession testing and retather management of condetovide a minimum of two	A certificate of the production of the production of the production of the production of the production, by male of the production, and the production of th	ers will be supplied a copy of t The user agrees and certifies th ther head injuries	e provided sers' s, that nship ad c the hold he Board hat it will	
S	Signatu	re of Sponsoring Organiza	tion Official:		Date	_	
			OFFICE USE	ONLY			
	nflict	☐ No Confli	et 🗆 A	pproved	Disapproved		
Nee	eds to b	e rescheduled					
Wa	iver of	certificate of insurance in	lieu of hold harmless/Ind	emnification: A	Approved Disapproved		
AP	PLICA	TION: Approved □	Disapproved				
ΑU	THOR	IZED SIGNATURE BOE			DATE		
		0/10				1. Ianuary 27 2	

BOE Approval: January 27, 2020 Rev: 12/10/19