

**Poquoson City Public Schools
Facility Request Form**

NAME OF ORGANIZATION _____

DATE OF APPLICATION _____

ORGANIZATION'S REPRESENTATIVE _____

TELEPHONE NUMBER _____

ADDRESS _____

DATE(S) REQUESTED: _____

SCHOOL REQUESTED:
BRIEF DESCRIPTION OF EVENT _____

START TIME: _____

END TIME: _____

In contracting for facility, the applicant agrees:

- A. To pay a rental fee for use of the facility. The rental fee schedule is noted below with there being **a four-hour minimum**, unless noted otherwise. Please indicate by checking the box(es) for all areas being requested:

Location within Facility/Grounds	Cost	Requested Location
Auditoriums	\$150.00	<input type="checkbox"/>
Cafeterias	\$100.00	<input type="checkbox"/>
Gymnasiums	\$150.00	<input type="checkbox"/>
PMS Field	\$500.00 for 5 hours	<input type="checkbox"/>
PES FIELD *	\$ 30.00 for 4 hours	<input type="checkbox"/>
Bradshaw Field Without Lights	\$ 20.00 per hour/2 hour minimum	<input type="checkbox"/>
Outdoor Lights at PMS or Bradshaw Field	\$30.00 per hour/2-hour minimum	<input type="checkbox"/>

Location within Facility/Grounds	Cost	Requested Location
Tennis Courts	\$60.00 per hour	<input type="checkbox"/>
Parking Lot	\$50.00 per hour	<input type="checkbox"/>
Classrooms	\$50.00	<input type="checkbox"/>
Technology Services	\$40.00 per hour	<input type="checkbox"/>
Overtime Rate	If after hours	
Computer Lab Set up	\$40.00 per hour	<input type="checkbox"/>
Computer Lab	\$150.00 per day	<input type="checkbox"/>
Outdoor Restrooms	TBD upon Request	<input type="checkbox"/>

Notes: 1. The building administrator will set a total fee for multiple areas used. Each hour over four hours will be an additional \$25.00 rental fee. 2. Additional fees may be charged for specific requests. *3. Groups using the PES field must park in the PES parking lot.

- B. To pay for the school employee/contractor employee(s) assigned by the building administrator to open, clean, remain on property during the building use, and secure the facility. *The minimum charge is \$60.00, with an hourly rate of \$15.00 after the initial four hours.* Two employee/contractor employees will be required for events with 300 or more attendees due to custodial needs.
- C. To follow the Rules and Regulations outlined in Superintendent's Regulation 2-4.1 to include providing adequate police supervision (if so indicated by the school administration) and preventing the use of alcoholic beverages, drugs and smoking on school premises.
- D. To follow PCPS guidelines for concussions as outlined in School Board Policy and Superintendent's Regulation 7-4.1 or the Virginia Board of Education Guidelines on Policies on Concussions in Student-Athletes.
- E. To provide certification of liability insurance for at least \$1 million. Outside organizations having informational or educational group meetings may have coverage of \$500,000.

I, _____ hereby state that my organization is covered with the proper amount of liability insurance. The name of the insurance company is _____ Insurance policy number is _____

Attached is check for \$ _____

Applicant's Signature: _____

Approved Disapproved

Principal's Signature

Superintendent's Signature

For Office Use Only

Notes:

Total Fee owed for facility use: _____ Date(s) Paid: _____

PCPS Activities Director Initials: _____ Poquoson Parks and Recreation Staff Initials: _____