SCHOOL DISTRICT OF CHELTENHAM TOWNSHIP
ADMINISTRATION BUILDING – OFFICE OF SUPPORT SERVICES
2000 Ashbourne Road • Elkins Park, PA 19027-1100 • 215-881-6310 • Fax: 215-881-6459

USE OF FACILITIES APPLICATION / CONTRACT REQUEST

THE ADMINISTRATION IS REPONSIBLE FOR THE USE OF ALL SCHOOL FACILITIES. IN ORDER THAT WE MAY PLAN FOR YOUR REQUESTED USE, KINDLY COMPLETE AND ***RETURN THE FOLLOWING FORM AT LEAST THREE WEEKS PRIOR TO THE EVENT:***

1. Organization: _____

2. Building Requested (circle one):

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3. Space Requested (check all needed):

[ ] AUDITORIUM	**[ ] CAFETERIA**	**[ ] GYMNASIUM**	**[ ] CLASSROOM/LIBRARY**	**[ ] FIELDS/GROUNDS**	**[ ] POOL**
[ ] Lavatories [ ] Chairs #_____ [ ] Tables #_____ [ ] Projector/Screen [ ] Microphone [ ] Podium	[ ] Chairs #_____ [ ] Tables #_____ List food/drink served: _____ _____ _____	[ ] Bleachers [ ] Lavatories [ ] Lockers [ ] Showers [ ] Scoreboard & Clock	[ ] Classroom(s): _____ _____ [ ] Library [ ] Projector/Screen [ ] Lavatories	[ ] Fields Lined [ ] Scoreboard [ ] Lavatories [ ] Field House(HS only) [ ] Stadium Lighting	

4. Event Title: _____

5. Day of the week: _____ **6. Month/Date/Year:** _____

7. Start Time: _____ **8. End Time:** _____

(If multiple dates or times are requested, please list ***each date & time*** *below)*

9. Classification/Rate Determination:

CLASS I _____ CLASS II _____ CLASS III _____

CLASS I: School Organizations or School Functions = Utilities & custodial/maintenance/ground/technical personnel fees charged for after- hour and weekend events

CLASS II: Community Groups (non-profit) = Application fee, Custodial fees, other applicable fees

CLASS III: All Other Organizations = Application fee, Rental fee, Custodial fees, other applicable fees

10. Number of People expected: _____ **11. Taxpayer Identification Number:** _____

12. Do you charge admission/sign up/misc. fees? Y N 13. If Yes, how much? $_____

14. Contact Information: *Please note: Final approval of event and determination of rates is left to the discretion of Support Services*

Person responsible for event: _____ Email:_____

Daytime Phone: _____ Address (to mail contract to):_____

_____

15. Person responsible for event activity onsite:_____ Phone: _____

16. Special Arrangements Needed: (Additional charges may be made for the use of some equipment and/or personnel. *See Rates for Use of School Facilities)* _____

_____

_____

Comments: _____

_____

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INSURANCE INFORMATION: ***BE SURE TO READ SDCT INSURANCE REQUIREMENTS*

THE REQUESTING ORGANIZATION MUST HAVE AN IN-FORCE LIABILITY POLICY OF $1,000,000.

1. Bodily Injury $_____ Property Damage $_____ Expiration Date_____

2. Is an outside (non-school or requesting party) vendor/organization involved in this activity?

(please circle) YES NO If YES: Name_____

Nature of involvement: _____

ALL OUTSIDE VENDORS/ORGANIZATIONS MUST HAVE AN IN-FORCE LIABILITY POLICY.

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AGREEMENT

I agree, on behalf of the indicated organization, that all members and guests will observe these regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to any school property during the indicated period of use. We also agree that our organization will at all times indemnify the School District of Cheltenham Township against any loss, damage, or expense of any kind, which said school district may sustain or incur because of use of the described facility by our organization and we will further hold said school district harmless for loss of any kind in connection herewith.

SIGNED: _____ DATE: _____ PHONE: _____
(Organization Officer/Staff Member)

ADDRESS: _____

EMAIL:_____ PHONE #2: _____

RULES GOVERNING USE OF FACILITIES

A. Smoking is prohibited on all School District property.

B. All alcoholic beverages are prohibited on all School District property.
C. Activity shall be restricted to that area for which permission is granted.
D. The activity shall not extend beyond the hours approved in the request.
E. All programs shall be planned so they do not interfere with the regular school schedule or activities. School activities take precedence.
F. The supervisor in charge of the activity shall be present before the activity is due to start and shall remain with the group until all have left.
G. The organization using the facility shall be responsible for moving its equipment into and out of the building.
H. In the absence of the building principal or administrative personnel, the custodian is charged with the responsibility of the building.
I. School authorities must have free access to all rooms/fields at all times.
J. Where custodial and/or maintenance personnel assistance is required a charge will be made and must be paid within thirty (30) days after the event.
K. Room(s) or facility used by applicant will be carefully examined after use. The applicant will make good promptly any loss or damage occurring as a result of use.
L. No school property or equipment is to be altered or removed from the premises.
M. No reservation will be made until this application is returned with approval by the facility=s senior administrative official.
N. The using organization shall be required to furnish public liability and property damage insurance in the amount of $1,000,000 for combined single limit.
O. A Certificate of Insurance, with proper limits of liability, shall be submitted as evidence of insurance coverage at least three weeks in advance of the event and must designate both the using organization and THE SCHOOL DISTRICT OF CHELTENHAM TOWNSHIP, THE BOARD OF EDUCATION OF CHELTENHAM TOWNSHIP, AND THE EMPLOYEES AND MEMBERS OF THE SCHOOL DISTRICT OF CHELTENHAM TOWNSHIP AND THE BOARD OF EDUCATION OF CHELTENHAM TOWNSHIP as insured. The absence of such a certificate will preclude use of the facility.
P. The contract is revocable at any time by school authorities.
Q. A $100 application processing fee is charged to all organizations unless waived by the school district. Checks, made payable to the SCHOOL DISTRICT OF CHELTENHAM TOWNSHIP, should be attached and returned with this application. Waiver of this fee is indicated on page 4 of this application.
R. CLASS II & CLASS III organizations: 100% of the scheduled rental fee for the use of the requested facility is to be attached and returned with this application. Checks should be made payable to the SCHOOL DISTRICT OF CHELTENHAM TOWNSHIP. This is in addition to the $100 application processing fee. Any additional charges for out-of-pocket expenses will be billed after the event and are payable within thirty (30) days after notice is mailed of such charges.

FOR SUPPORT SERVICES DEPARTMENT USE ONLY:

School Official_____ DATE: _____ [ ] approved [ ] not approved

Supervisor of Operation _____ DATE:_____ [ ] approved [ ] not approved

Anticipated Fees: Application $_____ Rental $_____ Custodial $_____
Maintenance $_____ Utilities $_____ Other $_____

TOTAL CONTRACT COST: $_____