

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

RECEIVED

SEP -9 2025

ASST SUPT. FOR
SUPPORT SERVICES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

- I. Name of Organization UC Takeoff
Date of Request 9/5/25
Person Making Request Vincent Moscatello
Are you a Wallkill Central School District Resident? ☒ Yes ☐ No
Staff Member in Charge (If Applicable, See Attached Form) _____
Daytime Telephone Number 845-542-0912
Address 23 Sofie Ct, Wallkill NY 12589
Building/Facilities Requested Ostrander Gym
Description of Activity Basketball
Are the Majority of the Participants Wallkill Central School District Residents?
☒ Yes ☐ No

Will Admission, Fees be Charged or Donations Accepted? ☐ Yes ☒ No

If Yes, Specify Community Benefit _____

Date(s) Wednesday + Friday 9/25/25 Time(s) 7:00 - 8:30 pm

II. INSURANCE INFORMATION thru 11/24/25

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? 1,000,000.00 per occurrence / 2,000,000.00 aggregate

III. RULES FOR USE OF SCHOOL FACILITIES (Please note: WiFi access will not be provided.)

- A. Organizations using District facilities will be required to follow all safety and health protocols required by state and local guidance, as well as the District's Reopening Plan.
- B. Board of Education approval is necessary for all athletic related and profit-making activities.
- C. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.
- In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- D. Any day school must be closed, activities that evening are cancelled. It is the responsibility of the sponsor group to notify the public.
- E. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- F. Functions shall be non-exclusive and open to the general public.

- G. The facilities must be vacated by the time indicated on the approved request form but no later than 10:30 P.M.
- H. No smoking is allowed on school property.
- I. No one is allowed in areas other than those authorized.
- J. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- K. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- L. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- M. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- N. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- O. Vehicles are permitted in authorized parking areas only.
- P. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Attachment).
- Q. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- R. The approval for use of school facilities is revocable at any time without notice.
- S. All school related functions will have priority for use of the building.
- T. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- U. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- V. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- W. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- X. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.


Signature of Representative of Requesting Organization

9/5/28
Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

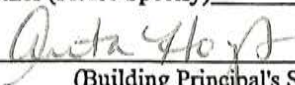
_____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

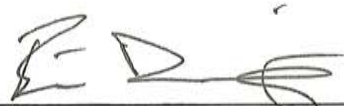
_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved:  Date 9/8/2025
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved:  Date 9/12/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of
Operational Services, Building Custodian, Athletic Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/12/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER K&K Insurance Group, Inc. P.O. Box 2338 Fort Wayne, IN 46801-2338		CONTACT NAME: MM - Amateur Sports - Teams, Leagues and Associations PHONE (A/C, No, Ext): 1-800-426-2889 FAX (A/C, No): 1-260-459-5105 E-MAIL ADDRESS: info@sportsinsurance-kk.com PRODUCER CUSTOMER ID:	
		INSURER(S) AFFORDING COVERAGE	
INSURED UC Takeoff 23 Sofia Ct Wallkill, NY 12589 A Member of the Sports, Leisure & Entertainment RPG		INSURER A: AIG Specialty Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 26883	

COVERAGES**CERTIFICATE NUMBER:** U00142006**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:	X		9YAPG0001334486101	09/12/2025 11:16 AM EDT	09/12/2026 12:01 AM	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea Occurrence)	\$1,000,000
							MED EXP (Any one person)	\$5,000
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$5,000,000
							PRODUCTS - COMP/OP AGG	\$1,000,000
							PROFESSIONAL LIABILITY	\$1,000,000
							Legal Liability to Participants	\$1,000,000
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY NOT PROVIDED WHILE IN HAWAII			9YAPG0001334486101	09/12/2025 11:16 AM EDT	09/12/2026 12:01 AM	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☐ RETENTION						EACH OCCURRENCE	
							AGGREGATE	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y / N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					☐ PER STATUTE ☐ OTHER	
							E.L. EACH ACCIDENT	
							E.L. DISEASE - EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	
A	MEDICAL PAYMENTS FOR PARTICIPANTS			9YAPG0001334486101	09/12/2025 11:16 AM EDT	09/12/2026 12:01 AM	PRIMARY MEDICAL	
							EXCESS MEDICAL	\$25,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Sport(s): Basketball Age(s): 13-15, 16-19

The Certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured.

CERTIFICATE HOLDERWallkill Central School District
1500 Route 208
Wallkill, NY 12589
Owner/Manager/Lessor of Premises**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Coverage is only extended to U.S. events and activities.

** NOTICE TO TEXAS INSURED: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas



WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

Name of Organization Southern Ulster Futbol Club
Date of Request Wednesdays beginning 11/5 through 3/18 (when available)
Person Making Request Joseph Deck

5-8pm
weekly

Are you a Wallkill Central School District Resident? ☒ Yes ☐ No

Staff Member in Charge (If Applicable, See Attached Form) _____

Daytime Telephone Number 215 - 808-1025

Address 10 Rosio Lane Modena NY 12548

Building/Facilities Requested Leptondale Elementary Gymnasium

Description of Activity Youth Soccer Practice

Are the Majority of the Participants Wallkill Central School District Residents?
☒ Yes ☐ No

Will Admission, Fees be Charged or Donations Accepted? ☐ Yes ☒ No

If Yes, Specify Community Benefit _____

Date(s) _____ Time(s) _____

II. INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? \$2,000,000 / \$1,000,000

III. RULES FOR USE OF SCHOOL FACILITIES (Please note: WiFi access will not be provided.)

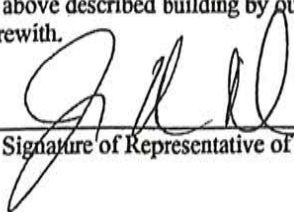
- A. Board of Education approval is necessary for all athletic related and profit-making activities.
- B. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.

In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- C. Any day school must be closed, activities that evening are cancelled.
It is the responsibility of the sponsor group to notify the public.
- D. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- E. Functions shall be non-exclusive and open to the general public.
- F. The facilities must be vacated by the time indicated on the approved request form but no later than 10:30 P.M.

- G. No smoking is allowed on school property.
- H. No one is allowed in areas other than those authorized.
- I. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- J. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- K. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- L. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- M. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- N. Vehicles are permitted in authorized parking areas only.
- O. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Attachment).
- P. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- Q. The approval for use of school facilities is revocable at any time without notice.
- R. All school related functions will have priority for use of the building.
- S. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- T. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- U. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- V. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- W. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.



Signature of Representative of Requesting Organization

8/27/25
Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

_____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved: _____ Date 8/28/25
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved: _____ Date 9/3/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of
Operational Services, Building Custodian, Athletic Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/31/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME:	
LIC #40558248		PHONE (A/C, No, Ext): 612-345-9683	
Player's Health Cover USA Inc.		FAX (A/C, No):	
Lifetime Work Edina 200 Southdale Center		E-MAIL ADDRESS: certificates@playershealth.com	
Edina MN 55435		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Everest National Insurance Company	
		INSURER B: HDI Global Specialty SE	
		INSURER C: Great American Insurance Company	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 196848 **REVISION NUMBER:** 2

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☒ OTHER: PER EVENT	Y		GCN0012432-251	9/1/2025	8/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 PARTICIPANT LEGAL LIAB \$ 1,000,000
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			GCN0012432-251	9/1/2025	8/1/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	☒ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$ 0			25QS1171	9/1/2025	8/1/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N ☐	N/A				PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Accident Medical			BSR-E758936-03	9/1/2025	8/1/2026	PER INJURY LIMIT \$ 200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is Additional Insured as required by written agreement per policy endorsement ECG 20 600 05 09. Coverage applies only to official, sanctioned & approved activities of ENYYSA. Coverage is primary & non-contributory when required by written contract or agreement. This certificate is issued on behalf of: HVYSL /Southern Ulster Soccer Club

CERTIFICATE HOLDER**CANCELLATION**

Wallkill Central School District	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
1500 Route 208 Wallkill NY 12589	AUTHORIZED REPRESENTATIVE <i>Don Pullen</i>

© 1988-2015 ACORD CORPORATION. All rights reserved.

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

I. Name of Organization Southern Ulster Futbol Club

Date of Request Wednesdays Nov. 5, 12, 19 Dec. 3, 10, 17 Jan. 7, 14, 21, 28

Person Making Request Joseph Deck

Are you a Wallkill Central School District Resident? ☒ Yes ☐ No

Staff Member in Charge (If Applicable, See Attached Form) _____

Daytime Telephone Number 215-808-1025

Address PO Box 268 Wallkill NY 12589

Building/Facilities Requested Plattekill Elementary Gymnasium

Description of Activity Soccer Practice

Are the Majority of the Participants Wallkill Central School District Residents?
☒ Yes ☐ No

Will Admission, Fees be Charged or Donations Accepted? ☐ Yes ☒ No

If Yes, Specify Community Benefit _____

Date(s) _____ Time(s) _____

→ 6-8 pm
Feb. 4, 11, 18, 25
March 4, 11 18
unable to accommodate
Nov. 19 or
Jan. 21 for
B.O.E.
meetings

II. INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? \$2,000,000 / \$1,000,000

III. RULES FOR USE OF SCHOOL FACILITIES (Please note: WiFi access will not be provided.)

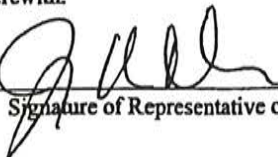
- A. Board of Education approval is necessary for all athletic related and profit-making activities.
- B. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.

In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- C. Any day school must be closed, activities that evening are cancelled.
It is the responsibility of the sponsor group to notify the public.
- D. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- E. Functions shall be non-exclusive and open to the general public.
- F. The facilities must be vacated by the time indicated on the approved request form but no later than 10:30 P.M.

- G. No smoking is allowed on school property.
- H. No one is allowed in areas other than those authorized.
- I. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- J. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- K. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- L. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- M. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- N. Vehicles are permitted in authorized parking areas only.
- O. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Attachment).
- P. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- Q. The approval for use of school facilities is revocable at any time without notice.
- R. All school related functions will have priority for use of the building.
- S. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- T. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- U. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- V. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- W. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.



Signature of Representative of Requesting Organization

8/5/25
Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

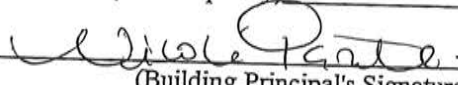
_____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved:  Date 9/5/25
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved:  Date 9/8/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of Operational Services, Building Custodian, Athletic Director

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

I.

Name of Organization Southern Ulster Futbol Club

Date of Request Thursdays 5-8pm Nov. 18, 20 Dec 4, 11, 18 Jan. 8, 15, 22, 29

Person Making Request Joseph Deck

Are you a Wallkill Central School District Resident? ☒ Yes ☐ No

Staff Member in Charge (If Applicable, See Attached Form) _____

Daytime Telephone Number 215-808-1025

Address PO Box 268 Wallkill NY 12589

Building/Facilities Requested Plattekill Elementary Gymnasium

Description of Activity Soccer Practice

Are the Majority of the Participants Wallkill Central School District Residents?
☒ Yes ☐ No

Will Admission, Fees be Charged or Donations Accepted? ☐ Yes ☒ No

If Yes, Specify Community Benefit _____

Date(s) _____ Time(s) _____

II.

INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? \$ 2,000,000 / \$ 1,000,000

III.

RULES FOR USE OF SCHOOL FACILITIES (Please note: WiFi access will not be provided.)

- A. Board of Education approval is necessary for all athletic related and profit-making activities.
- B. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.

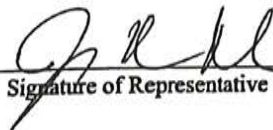
In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- C. Any day school must be closed, activities that evening are cancelled.
It is the responsibility of the sponsor group to notify the public.
- D. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- E. Functions shall be non-exclusive and open to the general public.
- F. The facilities must be vacated by the time indicated on the approved request form but no later than 10:30 P.M.

Feb. 5, 12, 19, 26 - steam night
March 5, 12, 19
possible steam night snow date

- G. No smoking is allowed on school property.
- H. No one is allowed in areas other than those authorized.
- I. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- J. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- K. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- L. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- M. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- N. Vehicles are permitted in authorized parking areas only.
- O. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Attachment).
- P. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- Q. The approval for use of school facilities is revocable at any time without notice.
- R. All school related functions will have priority for use of the building.
- S. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- T. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- U. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- V. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- W. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.



Signature of Representative of Requesting Organization

8/5/25

Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

_____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved: W. Pante Date 9/5/25
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved: E. D. Date 9/8/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of Operational Services, Building Custodian, Athletic Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/31/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER LIC #40558248 Player's Health Cover USA Inc. Lifetime Work Edina 200 Southdale Center Edina MN 55435		CONTACT NAME: PHONE (A/C, No, Ext): 612-345-9683 FAX (A/C, No): E-MAIL ADDRESS: certificates@playershealth.com	
INSURED Eastern New York Youth Soccer Association 167 Nassau Blvd. Garden City South NY 11530		INSURER(S) AFFORDING COVERAGE INSURER A: Everest National Insurance Company INSURER B: HDI Global Specialty SE INSURER C: Great American Insurance Company INSURER D: INSURER E: INSURER F:	
		NAIC # 10120 16131 16691	

COVERAGES**CERTIFICATE NUMBER:** 196848**REVISION NUMBER:** 2

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC ☒ OTHER: PER EVENT	Y		GCN0012432-251	9/1/2025	8/1/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ EXCLUDED PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 5,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 PARTICIPANT LEGAL LIAB \$ 1,000,000
	☐ ANY AUTO ☐ OWNED AUTOS ONLY ☒ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☐ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$ 0						EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Accident Medical			BSR-E758936-03	9/1/2025	8/1/2026	PER INJURY LIMIT \$ 200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is Additional Insured as required by written agreement per policy endorsement ECG 20 600 05 09. Coverage applies only to official, sanctioned & approved activities of ENYYSA. Coverage is primary & non-contributory when required by written contract or agreement. This certificate is issued on behalf of: HVYSL /Southern Ulster Soccer Club

CERTIFICATE HOLDER**CANCELLATION**

Wallkill Central School District

1500 Route 208

Wallkill

NY 12589

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

Name of Organization New Paltz Ballet

Date of Request 8-15-25

Person Making Request Peter Naumann

Are you a Wallkill Central School District Resident? Yes ☒ No ☐ ASST SUPT. FOR SUPPORT SERVICES

Staff Member in Charge (If Applicable, See Attached Form) _____

Daytime Telephone Number 845-532-3933 845 389 3938

Address 1 Bonticouview Drive, New Paltz, N.Y. 12561

Building/Facilities Requested auditorium, ticket & light booth, chorus & band rooms, bath

Description of Activity Ballet performance

Are the Majority of the Participants Wallkill Central School District Residents?
Yes ☒ No ☐ many are

Will Admission, Fees be Charged or Donations Accepted? ☒ Yes ☐ No
If Yes, Specify Community Benefit students learn about theatre, performing aspect
dedication, discipline, community duty

Date(s) 6-4, 6-5, 6-6, 6-7 Time(s) see attached letter
3:30-10 2:30-10:30 4-7 11-8

INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?
☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? 1,000,000, 2,000,000 ...

RULES FOR USE OF SCHOOL FACILITIES

- A. Board of Education approval is necessary for all athletic related and profit making activities.
- B. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.
- in the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- C. Any day school must be closed, activities that evening are cancelled. It is the responsibility of the sponsor group to notify the public.
- D. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- E. Functions shall be non-exclusive and open to the general public.
- F. The facilities must be vacated by the time indicated on the approved request form.

but no later than 10:30 P.M.

- G. No smoking is allowed on school property.
- H. No one is allowed in areas other than those authorized.
- I. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- J. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- K. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- L. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- M. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- N. Vehicles are permitted in authorized parking areas only.
- O. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Item II).
- P. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- Q. The approval for use of school facilities is revocable at any time without notice.
- R. All school related functions will have priority for use of the building.
- S. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- T. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- U. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- V. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- W. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.


Signature of Representative of Requesting Organization

8-15-25
Date

FOR BUILDING USE ONLY

Director of Operational Services Contacted

Yes _____
Building Custodian Contacted

Director of School Lunch Program Contacted

Athletic Director Contacted

Sent to District Office for Board Approval

Other (Please Specify)

Approved: _____ Date 8/19/2025
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved: _____ Date 9/5/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

Assistant Superintendent for Educational Services

Building Principal, Director of School Lunch Program, Director of
Operational Services, Building Custodian, Athletic Director

New Paltz School of Ballet

1 Bonticou View Drive
New Paltz, New York 12561
Phone (845) 255-0044
www.newpaltzschoolofballet
npsallet@gmail.com

Dear Roberta Tejada & Principal Masopust,

We would like to thank you again for your cooperation and the use of Wallkill High School auditorium for our past Ballet Recitals. It is always a pleasure to perform in your space which is largely due to your friendliness. Thank you for your professionalism.

We would like to request the use of your auditorium etc. for our next year's (2026) Recital. Below is a run through of our dates, times, and needs.

Thursday June 4th 2:30-10:00 PM

Load in and Set Up

Set up backdrops, lights, floor etc. Stage cleared with access to auditorium

Friday June 5th 2:30 – 10:30 PM

Rehearsal

We need 10 tables in lobby and a microphone set up backstage. Stage cleared with access to auditorium. Ticket Booth, Light Booth, and Lobby accessible.

Saturday June 6th 9:00 AM – 7:00 PM

Rehearsal & Performance

Same as Friday plus use of chorus, band rooms, and backstage restrooms by gym.

Sunday June 7th 11:00 – 8:00 PM

Performance and Load Out

All same as Saturday.

For the use of your school New Paltz School of Ballet will donate \$800. to S.O.M.E. Please RSVP as soon as possible and send any forms you need me to fill out!

Thank you so much

Peter & Lisa Naumann

Directors New Paltz School of Ballet

Please call (845) 532-3933 or (845) 389-3938

(not number in heading) with questions or concerns.



PETE&LI-01

TTOBIN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/23/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Emery & Webb, Inc. 989 Main Street Fishkill, NY 12524	CONTACT NAME:	PHONE (A/C, No, Ext): (845) 896-6727	FAX (A/C, No): (845) 896-6877
	E-MAIL ADDRESS: info@emerywebb.com		
INSURED Peter & Lisa Nauman dba New Paltz School of Ballet 1 Bonticou View Dr New Paltz, NY 12561	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Calicoon Cooperative Insurance Company		
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
INSURER F:			

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY						
	☐ CLAIMS-MADE ☒ OCCUR	X		#0900096DBOP	2/23/2025	2/23/2026	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
							MED EXP (Any one person) \$ 1,000
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	☐ POLICY ☐ PRO-JECT ☐ LOC						
	OTHER:						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	☐ ANY AUTO						BODILY INJURY (Per person) \$
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE \$
	EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE \$
	DED ☐ RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE ☐ OTH-ER ☐
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N	N/A					E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Walkkill Central School is included as additional insured as per form LS22 ed1/88

Location: Walkkill Senior High School 90 Robinson Dr. Walkkill, NY 12589

Dance recital 5/29/25-6/1/25

CERTIFICATE HOLDER

CANCELLATION

Walkkill Central Schools
PO Box 310
Walkkill, NY 12589

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Vincent P. Rensali

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month



I. Name of Organization Take The Leap Inc.
Date of Request 8/27/25
Person Making Request Haley Kwak + Maria Coppola
Are you a Wallkill Central School District Resident? Yes ☒ No
Staff Member in Charge (If Applicable, See Attached Form) _____
Daytime Telephone Number 845-208-4339
Address PO Box 393 Gardiner, NY 12525
Building/Facilities Requested WSHS: Auditorium, band + chorus rooms, box office, light booth,
Description of Activity Press Rehearsal + Shows
Are the Majority of the Participants Wallkill Central School District Residents?
Yes ☐ No ☒
Will Admission, Fees be Charged or Donations Accepted? Yes ☒ No ☐
If Yes, Specify Community Benefit provides entertainment
Date(s) June 12, 13, 14 Time(s) 6/12 3-9 pm
6/13 8am-9 pm
6/14 8am-9 pm

II. INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)
☐ No

If yes, what are the limits of liability? 1,000,000 / 2,000,000

III. RULES FOR USE OF SCHOOL FACILITIES (Please note: WiFi access will not be provided.)

- A. Organizations using District facilities will be required to follow all safety and health protocols required by state and local guidance, as well as the District's Reopening Plan.
- B. Board of Education approval is necessary for all athletic related and profit-making activities.
- C. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.

In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.
- D. Any day school must be closed, activities that evening are cancelled.
It is the responsibility of the sponsor group to notify the public.
- E. Police protection must be arranged for any event when it is deemed necessary by the school administration.
- F. Functions shall be non-exclusive and open to the general public.

- G. The facilities must be vacated by the time indicated on the approved request form but no later than 10:30 P.M.
- H. No smoking is allowed on school property.
- I. No one is allowed in areas other than those authorized.
- J. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- K. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- L. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- M. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- N. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- O. Vehicles are permitted in authorized parking areas only.
- P. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Attachment).
- Q. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- R. The approval for use of school facilities is revocable at any time without notice.
- S. All school related functions will have priority for use of the building.
- T. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- U. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- V. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- W. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- X. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.

Signature of Representative of Requesting Organization

9/8/25

Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

Yes _____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved: Alip _____ Date 9/10/25
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved: E. D. _____ Date 9/11/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of
Operational Services, Building Custodian, Athletic Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/28/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Fraleigh & Rakow, Inc 6796 Route 9 Rhinebeck NY 12572		CONTACT NAME: Kathleen Duignan PHONE (A/C, No, Ext): (845) 876-7035 FAX (A/C, No): (845) 876-5765 E-MAIL ADDRESS: kduignan@fraleighandrakow.com																						
INSURED Take The Leap Inc. PO Box 393 Gardiner NY 12525		<table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A:</td><td>PHI - Philadelphia Indemnity Ins Co</td><td></td></tr><tr><td>INSURER B:</td><td>HAR - Trumbull Insurance Company</td><td>27120</td></tr><tr><td>INSURER C:</td><td></td><td></td></tr><tr><td>INSURER D:</td><td></td><td></td></tr><tr><td>INSURER E:</td><td></td><td></td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	PHI - Philadelphia Indemnity Ins Co		INSURER B:	HAR - Trumbull Insurance Company	27120	INSURER C:			INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																						
INSURER A:	PHI - Philadelphia Indemnity Ins Co																							
INSURER B:	HAR - Trumbull Insurance Company	27120																						
INSURER C:																								
INSURER D:																								
INSURER E:																								
INSURER F:																								

COVERAGES**CERTIFICATE NUMBER:** CL2573028400**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY			PHPK2718348-000	07/14/2025	07/14/2026	EACH OCCURRENCE	\$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
							MED EXP (Any one person)	\$ 1,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:						Fire Legal Liability	\$ 50,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	☐ ANY AUTO						BODILY INJURY (Per person)	\$
	☐ OWNED AUTOS ONLY	☐ SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	☐ HIRED AUTOS ONLY	☐ NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
								\$
	☐ UMBRELLA LIAB	☐ OCCUR					EACH OCCURRENCE	\$
	☐ EXCESS LIAB	☐ CLAIMS-MADE					AGGREGATE	\$
	☐ DED ☐ RETENTION \$							\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			16WECAS9RXV	06/27/2025	06/27/2026	PER STATUTE	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N						
	If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A					
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Wallkill Central School Distri 90 Robinson Drive Wallkill NY 12589	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

© 1988-2015 ACORD CORPORATION. All rights reserved.

WALLKILL CENTRAL SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL FACILITIES

Request must be submitted 30 days prior to the 3rd Thursday of the following month.

I. Name of Organization Footworks Dance Center

Date of Request June 25 - 2025

Person Making Request Laurie Chikoles

Are you a Wallkill Central School District Resident? ☒ Yes ☐ No

Staff Member in Charge (If Applicable, See Attached Form) _____

Daytime Telephone Number 845-616-8089

Address 203 Forest Park - Wallkill, NY 12589

Building/Facilities Requested Auditorium - Banquet Room - Light Booth - Sound System

Description of Activity Dance Recital

Are the Majority of the Participants Wallkill Central School District Residents?

☐ Yes ☒ No

Will Admission, Fees be Charged or Donations Accepted? ☒ Yes ☐ No

If Yes, Specify Community Benefit Donated to the Wallkill Sr High School

Date(s) June 18th - 20th - 21st

Time(s) 18th 3:00 - 9:00

20th 9:00 - 9:00 (9:00 - 9:00)
21st 9:00 - 6:00 (9:00 - 6:00)

II. INSURANCE INFORMATION

Do you (the requesting organization) have an in-force public liability policy?

☒ Yes (If yes, please provide a certificate of insurance, listing the Wallkill Central School District as an additional insured)

☐ No

If yes, what are the limits of liability? _____

III. RULES FOR USE OF SCHOOL FACILITIES

A. Board of Education approval is necessary for all athletic related and profit making activities.

B. A custodian must be on duty while the building is in use. A custodial fee is to be charged when overtime is required.

In the event of an austerity budget, or if custodians are not on duty, fees will be charged for all usage, or a staff member must sign the attached form for assumption of responsibility.

C. Any day school must be closed, activities that evening are cancelled. It is the responsibility of the sponsor group to notify the public.

D. Police protection must be arranged for any event when it is deemed necessary by the school administration.

E. Functions shall be non-exclusive and open to the general public.

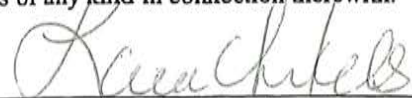
F. The facilities must be vacated by the time indicated on the approved request form

but no later than 10:30 P.M.

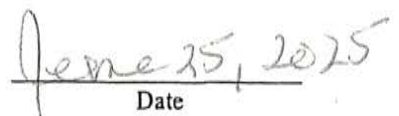
- G. No smoking is allowed on school property.
- H. No one is allowed in areas other than those authorized.
- I. No drinking of alcoholic beverages, use of drugs, fighting, abusive language or illegal acts are to be permitted on the premises.
- J. No school supplies, materials or equipment may be used without specific prior approval of the building principal.
- K. The using organization is responsible for the care and safeguarding of all personnel, facilities, and equipment.
- L. Facilities shall be left neat and clean, or a charge for additional custodial services will be levied.
- M. When use of gyms is authorized for recreational purposes, sneakers must be worn.
- N. Vehicles are permitted in authorized parking areas only.
- O. The using organization may be required to furnish public liability and property damage insurance with limits at least equal to those of the school district. (See Item II).
- P. A Certificate of Insurance may be requested, if deemed necessary with appropriate limits of insurance, by Central Administration.
- Q. The approval for use of school facilities is revocable at any time without notice.
- R. All school related functions will have priority for use of the building.
- S. State Law requires that the sponsoring group be responsible to inform persons in attendance, at the beginning of the event, procedures to be followed in an emergency (fire, etc.) so that all may be able to leave the building in a timely and orderly manner.
- T. Groups using the outdoor lighted athletic facilities will incur a charge in an amount equal to the rate charged to the District by the local utility company.
- U. No group shall use any pesticide or herbicide application in any building located on school district property or on any fields.
- V. The Board of Education will allow the Superintendent of Schools to use discretion in approving requests prior to official action by the Board of Education.
- W. The District may waive or modify any of the rules for use of school facilities.

All school buildings have a map designating fire exits. Please request a map from the office.

I agree on behalf of the organization named that all members and guests will observe the outlined regulations and that we, individually, and as an organization, will assume full financial responsibility for any and all damages done to the Wallkill Central School District's property during the indicated period of use. We also agree that our organization will at all times hereafter indemnify the above-named school against any loss, damage or expense of any kind, which said school may sustain or incur because of use of the above described building by our organization and we will further hold said school harmless for loss of any kind in connection therewith.



Signature of Representative of Requesting Organization



Date

FOR BUILDING USE ONLY

_____ Director of Operational Services Contacted

KCB _____ Building Custodian Contacted

_____ Director of School Lunch Program Contacted

_____ Athletic Director Contacted

_____ Sent to District Office for Board Approval

_____ Other (Please Specify) _____

Approved: Alyssa _____ Date 8.19.2025
(Building Principal's Signature)

Disapproved: _____ Date _____
(Building Principal's Signature)

FOR DISTRICT OFFICE USE ONLY

Approved: BDS _____ Date 9/6/2025
(Assistant Superintendent for Support Services)

Disapproved: _____ Date _____
(Assistant Superintendent for Support Services)

Approval/Disapproval Forwarded To:

_____ Assistant Superintendent for Educational Services

_____ Building Principal, Director of School Lunch Program, Director of
Operational Services, Building Custodian, Athletic Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/20/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER John J Arbolino 295 North Plank Rd. Newburgh NY 12550 INSURED Laurie Chikeles DBA Footworks Dance Center 203 Forest Park Wallkill NY 12589	CONTACT NAME: Leslie Weber PHONE (A/C, No, Ext): (845) 566-9560 FAX (A/C, No): E-MAIL ADDRESS: leslie@jarbolino.com <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Hartford</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Hartford		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Hartford															
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
☒	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			16SBAAA6638	02/04/2025	02/04/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						\$ \$ \$ \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$ PER STATUTE ☐ OTH-ER ☐
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

June 13,14,15

CERTIFICATE HOLDER

CANCELLATION

Wallkill Central School District 1500 Route 208 Wallkill NY 12589	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Leslie Weber
---	--

© 1988-2015 ACORD CORPORATION. All rights reserved.