APPLICATION FOR USE OF MERCED CITY SCHOOL DISTRICT FACILITIES

Note: All requests **MUST** be delivered to: MCSD Facilities Dept., 2111 Wardrobe. Merced, CA95341 (209)385-6332. halcorn@mcsd.k12.ca.us **No less than** 15 working days prior to date of use requested. Any facility use **Must** follow return of District Approval Application.

FACILITY REQUESTED: _____ DATE RECEIVED _____

APPLICANT'S NAME: _____ ADDRESS_____

APPLICANT ORGANIZATION: _____ PHONE _____ CELL _____

DATE(S) REQUESTED _____ EMAIL: _____

TIME(S): FROM _____AM/PM TO _____AM/PM WILL ADMISSION OR ATTENDEES PAY FEES? _____

ESTIMATED ATTENDANCE: Adults _____ Minors _____ Total _____

PURPOSE/FUNCTION:_____

COMMUNITY FACILITY USE FEE SCHEDULE

Facility	Facility Use Utility Fees				Custodial/Staff Service Fee	Other SNSS Service Fee
	- 4 Hrs Non-Profit	+ 4 Hrs Non-Profit	- 4 Hrs Private	+ 4 Hrs Private		
Cafeteria/MPR	$75.00	$100.00	$100.00	$150.00	Min. 2 Hr. OT	Kitchen Use Fee
Classroom	$20.00	$35.00	$50.00	$75.00	Min. 2 Hr. OT	
Gymnasium	$100.00	$150.00	$150.00	$200.00	Min. 2 Hr. OT	
Kitchen	$50.00	$75.00	$80.00	$150.00	Min. 2 Hr. OT	Kitchen Use Fee

*** Fees subject to change**

SPECIFIC FACILITY, EQUIPMENT, STAFF SUPPORT REQUESTS

- ☐ **Classroom(s)** _____
- ☐ **Cafeteria/MPR** _____
- ☐ **Kitchen** _____
- ☐ **Gymnasium** _____
- ☐ **# Tables _____ and/or Chairs** _____
- ☐ **Other Facility:** _____
- ☐ **Custodial and/or other needs** _____
  _____

ADDITIONAL FEES

Damage Assessment*:* Cost to repair damaged equipment or facilities will be assessed. _____

Deposit: Depending on equipment/facility type and duration of event, a $250 to $500 refundable deposit may be applied. ***Initials***

Security Fee: Additional fee of $40 to secure/alarm facility will be assessed depending on circumstances of use or for any fraction of additional hours of necessary supervision of District facilities. This fee applies to any requirement by the District to maintain supervision of MCSD facility by custodial or other staff member.

Custodial Supply/Maintenance Fee: A $15 fee to offset ongoing maintenance, custodial and site supplies and other indirect costs. Fee may be subject to increase based on number of attendees.

Custodial/Staff Services Fee: A $40 fee for custodial setup/breakdown and cleaning (Minimum 2 hours) may be applied.

Kitchen Use Fee: A $40 fee for use of kitchen/food preparation for mandatory oversight (Minimum 2 hours) may be applied.

Technology Use Fee: A $40 fee for MCSD staff to provide technical assistance for computer/audio-visual, etc. (Minimum 2 hours).

REQUIREMENTS AND RESPONSIBILITIES OF APPLICANT – INITIAL EACH BOX

- ☐ **Certificate of Liability Insurance, verifying an amount of liability coverage not less than $500,000 per occurrence and $500,000 per injury, property damage coverage in an amount not less than $500,000, and the district as an added insured shall be requested**
- ☐ **Applicant and organization agrees to pay all applicable utilities/maintenance and additional fees as per above schedule prior to date of event unless otherwise approved by District administration.**
- ☐ *** PRICES SUBJECT TO CHANGE* - MCSD reserves the right to modify fees for costs incurred.**

SCHOOL SITE APPROVAL ☐ Approved by Site Administrator ☐ Denied (Reason if denied)_____

School Site Administrator:_____ Date: _____

OTHER RESPONSIBILITIES OF APPLICANT (Please initial each line)

_____ Applicant responsible to pay use facility fees (see above) assessed by District administration

_____ Permits for use will be issued only if the applicant agrees to adhere to MCSD District policies and procedures to safeguard and care for all property of the district, and to assume the responsibility for payment of any damage or loss of such property. MCSD reserves the right to deny future facility use applications for violation of policies.

_____ Any materials used as decoration, costumes, stage sets, or for any other purpose in any District facility shall be flame retardant and appropriately treated and/or utilized. No signs or decorations are to be taped, nailed or otherwise attached to walls, windows, ceilings, or drapes. Custodial fees will be applied for necessary removal.

_____ Non-marking rubber soles or tennis shoes will be worn by participants in games involving the use of multi-purpose, cafeteria, or gymnasium facilities. Costs for necessary custodial attention or resurfacing of floors may be applied.

_____ Merced City School District is a Drug and Tobacco Free Workplace. Any tobacco use, smoking and/or alcoholic beverages are not permitted on School District Property or within ¼ mile.

_____ If kitchen facilities are requested, it will be ***Mandatory*** to employ one (1) Nutrition Services employee to supervise the operations, insure sanitary conditions, and/or operate the equipment utilized during event, with fees assessed.

_____ Applicant must have approval by **Both** site and District administration prior to use of any MCSD facility.

_____ Check-out inspection will be required after end of facility use – responsibility of applicant to schedule with site staff.

DISCLOSURE AGREEMENT: I/We have read this agreement and accept the facilities for which this application is made in an "AS IS" condition. In consideration of the minimal fees paid for use of the facility, the applicant and/or organization agrees to indemnify, defend and hold harmless the Merced City School District, it officers, officials, employees, agents and volunteers, from all actions, liabilities, claims, damage to persons or property, losses, costs penalties, obligations, errors, or omissions that may be asserted or claimed by any person, firm or entity arising out of or in connections with the activities conducted by the applicant and/or organizations, whether or not there is concurrent passive or negligence on the part of the Merced City School District or Merced School District Personnel.

The undersigned, as duly authorized representative for _____, states that, to the best of his/her knowledge, the school property for use of which application is hereby made will not be used for the commission of any crime or any act which is prohibited by law.

The undersigned agrees to submit payment for facility use (as per scheduled use and/or assessed fees by District administration) and deliver to MCSD Fiscal Services Department located at 444 West 23rd Street Merced, CA. 95340 prior to date of event unless otherwise noted below. Please make check(s) payable to Merced City School District. Returned check(s) will result in cancellation of event and/or additional charges not less than $50.00 for each occurrence. Fees for custodian and/or Nutrition Services personnel will be billed after event. If other expenses occur, charges will be made accordingly.

Applicant Signature and Title: _____ Date: _____

FISCAL OFFICE USE ONLY:

Special Instructions and/or requirements of applicant:_____

_____Deferred Billing Allowed: _____YES _____ NO

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☐ Approved ☐ Denied Reason if denied _____

Cabinet Approval:_____ Date: _____