CLARKSDALE
MUNICIPAL SCHOOL DISTRICT

FACILITY USE AGREEMENT

MAINTENANCE & TRANSPORTATION DEPARTMENT

Every Student. Every Need.

APPLICATION INFORMATION

- Facility Reservations
- Event Scheduling
- Community Use
- Admissions & Merchandise
- Insurance Requirements
- District Approval

IMPORTANT REMINDERS

- ☑ Submit at least 3 weeks prior
- ☑ Separate form for each event
- ☑ Certificate of Insurance may be required
- ☑ District Use takes priority
- ☑ Approval required before advertising

APPLICANT INFORMATION

Organization Name: _____

Organization Type: ☐ CMSD School ☐ PTA/PTSA ☐ Booster Club/School Foundation

☐ 501(c)(3) Non-Profit ☐ Other (explain): _____

Responsible Party Name: _____

Physical Address: _____

City, State: _____ Zip Code: _____

Billing Address (if different): _____

City, State: _____ Zip Code: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Fax Phone #: _____

Email Address: _____

EVENT INFORMATION

Event: _____

Detailed Description of Event: _____

_____

_____

Number of Participants/Performers: _____ | Number of Spectators/Audience: _____

Will Admissions be Charged? ☐ No ☐ Yes If yes, how much? $ _____

Will Merchandise be Sold? ☐ No ☐ Yes

TRAVEL PURPOSE / NOTES

_____

_____

REIMBURSEMENT INFORMATION

Total Mileage: _____ Mileage Rate: $ _____ Amount Requested: $ _____

APPROVALS

EMPLOYEE CERTIFICATION

I certify that the information provided above is accurate and represents official CMSD business.

Signature: _____

Date: _____

PRINCIPAL / SUPERVISOR APPROVAL

Signature: _____

Date: _____

SUPERINTENDENT APPROVAL

Signature: _____

Date: _____

★ SAFETY ★ ACCOUNTABILITY ★ INTEGRITY ★ SERVICE ★ EXCELLENCE

Every Student. Every Need.

CLARKSDALE
MUNICIPAL SCHOOL DISTRICT

FACILITY USE AGREEMENT

MAINTENANCE & TRANSPORTATION DEPARTMENT

APPLICATION INFORMATION

- Facility Reservations
- Event Scheduling
- Community Use
- Admissions & Merchandise
- Insurance Requirements
- District Approval

IMPORTANT REMINDERS

- ☑ Submit at least 3 weeks prior
- ☑ Separate form for each event
- ☑ Certificate of Insurance may be required
- ☑ District use takes priority
- ☑ Approval required before advertising

FACILITY INFORMATION

School/Facility Requested: _____

Room(s)/Area(s) Requested: _____

How do you plan to use the rooms requested (attach additional documents, if needed)? _____

_____

_____

SCHEDULE OF USE

Date MM/DD/YYYY	Day of the Week	Purpose [1]	Load-in Time [2] Begin	Load-in Time [2] End	Doors Open [3]	Event Time [4] Begin	Event Time [4] End	Load-out Time [5] Begin	Load-out Time [5] End

1. What will the facility be used for on this date? For example, if request is for a basketball league, is this date for practice(s) or game(s)?
2. Time that the client needs to prepare the room(s) and setup prior to the start of the event.
3. Time that the doors open to the audience or group for entry prior to the start of the event, if applicable.
4. Time that the event begins and ends.
5. Time that the client needs after the event concludes to remove any setup and clear out of the space.

SUPPORT SERVICES

Indicate if you will need any of the following (check all that apply):

- ☐ Use of audio, video, lighting, or technology equipment
- ☐ Field Lights
- ☐ School Resource Officers for Security (may be required for certain events)
- ☐ Custodial Services (may be required for certain events)
- ☐ Other (explain): _____

Are there any other needs or special requests (attach additional document, if necessary)?

_____

_____

Certificate of Insurance attached: ☐ Yes ☐ No

CLARKSDALE
MUNICIPAL SCHOOL DISTRICT

FACILITY USE AGREEMENT

MAINTENANCE & TRANSPORTATION DEPARTMENT

APPLICATION INFORMATION

- Facility Reservations
- Event Scheduling
- Community Use
- Admissions & Merchandise
- Insurance Requirements
- District Approval

IMPORTANT REMINDERS

- ☑ Submit at least 3 weeks prior
- ☑ Separate form for each event
- ☑ Certificate of Insurance may be required
- ☑ District use takes priority
- ☑ Approval required before advertising

ACKNOWLEDGEMENT & SIGNATURE

By signing below, I acknowledge and understand the following:

- This form is solely an application and does not constitute a contract or approval of the requested use. Approval is subject to and contingent upon execution of a Facility Use Agreement; receipt of all specified fees, insurance, and supporting documentation; and compliance with all District policies and administrative rules.
- School and District use of facilities takes precedence over other uses.
- The individual/group/organization will work ONLY through the Clarksdale Municipal School District for facility use approval, scheduling, and modifications.
- The opportunity to use district/school facilities is non-transferable and may not be assigned.
- Changes to the requested/contracted use must be submitted in writing to the Clarksdale Municipal School District at least five (5) business days in advance or all charges will apply. No changes may occur until after written approval from the Clarksdale Municipal School District.
- No advertising, social media, or other internet source, materials, or broadcasts shall name the facility, Clarksdale Municipal School District, or any buildings or grounds either owned or operated by the District as the location of any event prior to the approval of the request and execution of a Facility Use Agreement.

SIGNATURE OF RESPONSIBLE PARTY

Signature: _____ Date: _____

SIGNATURE OF ORGANIZATION HEAD
(If not the same as the Responsible Party)

Signature: _____ Date: _____

SIGNATURE OF PRINCIPAL (APPROVAL)

Signature: _____ Date: _____

SIGNATURE OF SUPERINTENDENT (APPROVAL)

Signature: _____ Date: _____

NAME(S) OF SUPERVISORS ASSIGNED

_____ _____

_____ _____

★ SAFETY ★ ACCOUNTABILITY ★ INTEGRITY ★ SERVICE ★ EXCELLENCE ★

Every Student. Every Need.