



BALDWIN COUNTY SCHOOLS

110 North ABC St.
Milledgeville, GA 31061
(478) 457-3303

EXHIBIT A

FACILITIES USE FORM

Name of Organization: _____

Address: _____

Street Address

City

State

Zip Code

Billing Address (if different from above):

Street Address

City

State

Zip Code

Primary Contact (Event Coordinator): _____

Phone: _____ Cell Phone: _____ Email: _____

Type of Organization: (Check one) _____ School or district organization (*must be officially recognized*)

_____ Other off-campus organization

EVENT INFORMATION

Title of Event: _____

List all dates and times requested for the rental (*Include alternate dates if applicable*):

Description of the event:

Will admission or registration be charged, or a donation requested? _____ Yes _____ No

AUDIENCE INFORMATION

Anticipated Audience Size: _____

The event will be attended primarily by (*check one*):

_____ Baldwin County School students, parents, and staff

_____ Off-campus audience

EQUIPMENT/SET-UP INFORMATION

Describe your set-up and equipment needs (tables, chairs, podium, projector & screen, microphones, speakers, etc.):

This form is used for requesting the usage of Baldwin County School facilities. Usage is only granted once the Facilities Calendar is checked, a \$500 reservation deposit is placed, proof of insurance is provided, and the required parties have signed all the necessary applications and contracts. Additional rental and service fees are associated, and school-sponsored activities take priority over outside events. All Funeral Events/Special Services shall adhere to the [Facilities Use Rental Fee Guidelines](#).

Event Coordinator: _____
Signature

Date

Return the completed form to the appropriate person listed below:

- Fine Arts facilities (theatre/auditorium) – Fine Arts Director, Baldwin High School
- Athletics facilities – Athletic Director, Baldwin High School
- All Other Requests – Principal and School Secretary

FOR OFFICE USE ONLY:

Total Security needed: _____ **Total Custodians needed:** _____

Date Received: _____

Date Cleared with Facility Calendar: _____

Principal Approval:

Signature

Date

For Fine Arts Facilities Approval ONLY:

Signature

Date

For Athletics Facilities Approval ONLY:

Signature

Date

Custodian Supervisor Approval: _____

Date _____

Deputy Superintendent Approval: _____

Date _____



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FORM COMPLETED BY:	
BCS Rep:	_____
Lessee:	_____
Date:	_____
CONTINUE EXHIBIT A	

FACILITIES USE PRE-EVENT ESTIMATE

Title of Event:

List all dates and times anticipated for the rental:

RENTAL FEES (per day) - <i>Select all that apply</i>					
	ELEMENTARY SCHOOLS	MIDDLE SCHOOL	HIGH SCHOOL		ATHLETIC FACILITIES
THEATER	n/a	500.00	Little Theatre	350.00	Stadium with lights
			Fine Arts Center	800.00	1,500.00
GYM	500.00	650.00	650.00		Stadium without lights
CAFETERIA	300.00	500.00	500.00		1000.00
CLASSROOM	150.00	150.00	150.00		All other athletic fields
					800.00

SERVICE and OTHER FEES – <i>Select all that apply</i>				
Building Administrator	40.00/hour		Fine Arts Center Rehearsal Fees	100.00 per day up to 4 hours Each additional hour – 25.00
Security	50.00/hour		Fine Arts Center – Grand Piano (without tuning)	80.00
Custodial	35.00/hour		Lighting Technician	35.00/hour (required)
Cafeteria Designee	25.00/hour		Sound Technician	35.00/hour (required)
			Lighting/Sound	70.00/hour (required)
Other Set-Up fees are to be determined by event requirements				

*****Please don't use this form for school fundraisers*****

All individuals or organizations seeking to rent our Fine Arts spaces will be required to select a qualified individual from our Baldwin Fine Arts list to operate the lighting and sound booth. This change is being implemented to ensure the proper and safe use of our equipment and to maintain the integrity of our performance spaces.

The current list of selected Fine Arts Professionals includes:

- Trent Henderson – trent.henderson@baldwin.k12.ga.us
- Alan Kirkland – alankirkland@gmail.com
- Keith Bergeron – keith.bergeron@gcsu.edu
- Nickolas Geeker – nickolas.geeker@baldwin.k12.ga.us
- Zack Pursley- pursleyzack@gmail.com

_____ the selection of an approved Fine Arts professional for operation of the lighting/sound booth.

_____ Approval by Fine Arts Professional (FAP).

_____ Alternate Recommended.

_____ Approval by Alternate (FAP).

FACILITIES USE EVENT INVOICE

Title of Event: _____

List all dates and times at which the facility was in use:

RENTAL FEES			
Facility	Cost Per Day	No. of Days	Total
TOTAL RENTAL FEES			

SERVICE and OTHER FEES			
	Cost Per Hour	No. of Hours	Total
Building Administrator			
Security			
Custodial			
Cafeteria Designee			
Lighting Technician			
Sound Technician			
Fine Arts Center Rehearsal Fees			
Fine Arts Center – Grand Piano			
Other Set-Up Fees, as required by the event			
Fine Art Professional Selected			

TOTAL SERVICE and OTHER FEES _____

TOTAL FEES _____

Minus Deposit - \$500.00 _____

Total Minus Deposit _____

TOTAL DUE _____

TOTAL ESTIMATED RENTAL FEES _____

TOTAL ESTIMATED SERVICE/OTHER FEES _____

TOTAL ESTIMATED FEES _____

	AMOUNT	DUE	RECEIVED	DATE
DEPOSIT	500.00			
CERTIFICATE OF INSURANCE				
80% OF THE ESTIMATED TOTAL		10 working days before the event		
<i>The Post-Event Invoice with the final amount due will be shared within a week of the end of the rental.</i>				

Approved by Lessee: _____ Date: _____

Rental Fee Increase, effective 8/4/2025