Los Molinos Unified School District

APPLICATION FOR USE OF COMMUNITY FACILITIES
SMOKING IS NOT PERMITTED

Applicant Organization _____

Person in charge _____ Title _____

Address _____Phone_____

Alternate person in charge _____

Address _____Phone_____
(Street) (City)

Approximate number involved: Children _____ Adults _____
Roster must be submitted displaying grade levels

(a) For single meetings:
Date _____ Time: From_____to_____

(b) For series meetings: Starting Date: _____ Ending _____
Day's _____ Time: From_____ to_____

(c) Site Requested: [ ] Los Molinos High School [ ] Los Molinos Elementary [ ] Vina

(d) Room Requested: [ ] Cafeteria ($100.00/event) [ ] Kitchen ($100.00/event)
[ ] Conference Room ($75.00/event) [ ] Gym: ☐ Hourly ☐ Daily (see fee schedule on pg. 4)
[] Other: _____ ***Custodial service fees may be added if District deems it necessary.***

(e) Equipment authorized
_____

DECLARATION OF APPLICANT

1. Nature of activity or meeting
_____
_____
2. Applicant has received, or will receive for the activities herein listed, contributions, cash collections, registration fees, admission fees, tuition, donations, or other receipts estimated in amount of $ _____. If no receipts anticipated for these activities check here. (__)
3. Receipts set forth in Item 2 above will be used for
_____
_____
4. I, the undersigned, hereby certify that I will be personally responsible on behalf of the applicant for any damages caused to the school building, furniture, equipment, or grounds occurring through the occupancy or use of said building and/or grounds by the applicant, normal wear and tear excepted.
5. I hereby certify that I have received and read the Rules and regulations and the Conditions for Use of Facilities Form attached and that I, and the applicant which I represent, will abide by them and will conform to all applicable provisions of the Constitution and laws of California and to all other rules and regulations of the Board of trustees and its authorized agents which may be communicated to the applicant.
6. It is agreed that if the scheduled use of facilities is altered or canceled, the site administrator must be notified by the responsible user forty-eight (48) hours in advance to avoid financial obligation.
7. In executing this declaration, I certify that I have been duly authorized by the applicant listed above to act in its behalf in making application for use of said facilities.
8. The undersigned 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 act which is

prohibited by law and that the organization on whose behalf he/she is applying for use of school property, upholds and defends the Constitution of the United States and the State of California.

HOLD HARMLESSS & INDEMNIFICATION AGREEMENT

THE UNDERSIGNED AGREES TO DEFEND, INDEMNIFY AND HOLD HARMLESS THE LOS MOLINOS UNIFIED SCHOOL DISTRICT. IT'S BOARD OF TRUSTEES, AGENTS AND EMPLOYEES, INDIVIDUALLY AND COLLECTIVELY. FROM AND AGAINST ALL COSTS, LOSSES, CLAIMS, ACTIONS AND JUDGEMENTS ARISING FROM PERSONAL INJURIES, PROPERTY DAMAGE OR OTHERWISE, HOWEVER CAUSED THAT MAY ARISE FROM OR BE ALLEGED TO BE CAUSED BY THE UNDERSIGNED'S USE OR OCCUPANCY OF DISTRICT FACILTIES, FURNITURE OR EQUIPMENT, THE UNDERSIGNED FURTHER AGREES TO PROVIDE A CERTIFICATE OF INSURANCE FOR LIABILITY COVERAGE SATISFACTORY TO THE DISTRICT.

Signature of Representatives

_____Date_____

Address

_____

Telephone_____

RULES AND REGULATIONS

1. **INSURANCE REQUIRED OF APPLICANT: Commercial General Liability** on an occurrence form with a minimum limit of **$1,000,000 each occurrence/$2,000,000 general aggregate** from an insurer with a financial rating of A7 or better. Liability deductible not to exceed $2,500. **Additional Insured Provision**: The Los Molinos Unified School District, its elected or appointed officials, employees, agents and volunteers shall be named as additional insured under the general liability policy, by endorsement to the Certificate. A separate endorsement attached to the Certificate of Insurance evidencing the additional insured coverage is required. **Primary Insurance:** Applicants insurance shall be primary insurance as respects to the Los Molinos Unified School District it's elected or appointed officials, employees, agents and volunteers. Any insurance or self-insurance maintained by the Los Molinos Unified School District, its elected or appointed officials, employees, agents and volunteers shall be excess and shall not contribute with it.
2. Facilities must be under the supervision of a responsible adult.
3. There shall be no tobacco products, intoxicants or narcotics used in or about school buildings and premises, nor shall profane language, quarreling, fighting or gambling be permitted. Violation of this rule by an organization during occupancy shall be sufficient cause for denying further use of school premises to said organization.
4. Tables are to be moved by adults only.
5. Use is confined to the area(s) named in the approved application, with appropriate corridor and lavatory facilities. Access to rooms or facilities other than approved by application shall not be permitted.
6. School and or student body equipment will not be used unless specifically authorized by the building principal or his/her designee. Equipment such as projectors, record players, microphones, etc., may be available for use under these regulations if supervisory arrangements have been made and approved by the principal in advance,
7. Persons or organizations using school premises which have equipment such as stage, stage equipment, piano, furniture or apparatus, must have expressed permission by the on-site administrator for their use.
8. Request for use of all other equipment utilized by the schools for their instructional program by any person or organization, whether employed by the district or not, must receive prior permission from the administrator in charge.
9. The using group agrees to assume financial responsibility for all damages and any additional custodial and/or cafeteria services required.
10. The adult in charge will seek out custodian on duty to notify him/her when the activity is completed, and sign check-out sheets.
11. The using group will return the facility to its original arrangement and conditions before leaving.
12. Enforcement of rules is the responsibility of the adult in charge, for all related activities inside and outside the building. The individual must be present during the entire period of use.
13. No preparation shall be used on the floors at any time by groups using the building for dancing.
14. The Guardian Community canter is for primary use of community activities. Therefore, if the need arises the guardian reserves the right to bump reservations an organization. As much lead time as possible will be given.

15. The District requires that all functions terminate by 10:00 P.M. unless special arrangements have been made with Coordinator.

The undersigned agrees that the aforementioned rules and regulations will be complied with in full and failure to abide by such rules regulations will be sufficient cause to revoke permission to use school facilities.

The undersigned who is to be charge of the activity is twenty-one years of age or over and agrees that he/she will be responsible to the Guardian Board of trustees for the use and care of community property. He/she further agrees that the character of this activity will conform that stated in the application.

Facility/Service	**Fee**
Room Use	$40.00 per hour
Conference Room	$75.00 per event/per day
Cafeteria	$100.00 per event/per day
Kitchen	$100.00 per event/per day
Custodial Fee – Regular Time	$15.00 per hour
Custodial Fee - Overtime	$30.00 per hour
Custodial Setup Fee	$30.00 per hour
Custodial Closing Fee	$60.00 per event/per day (If applicable)
Gym	$150.00 per event/per day
Gym Hourly Fee	Free to LMUSD Student Groups (80% of players attend LMUSD schools)
	$25 per hour for outside non-profit groups with 501 C form
	$35 per hour for outside groups for profit

** You will be invoiced per the terms of this agreement*

FOR THE USER:

Legal Name _____
(Please Print)

Authorized Agent _____
(Signature) (Date)

Address: _____

Telephone_____

Date_____

Please attach: Certificate of Insurance
Endorsement Coverage_____

The following wording must appear on the Certificates and Endorsement:
"It is hereby understood and agreed that the Los Molinos Unified School District, its officers, agents, employees, and Board Members are added as additional named insured".

Will any items be offered for sale? If so, what?
_____

Fees are payable to **Los Molinos Unified School District** upon approval of application. Failure to comply with the terms will be causes to deny permission.

FOR LMUSD

Authorized Agent_____Title _____ Date_____
(Signature)

Fees: _____

Additional Charge: _____

1. For Custodial Services Yes____ No ___

   For Food Services Yes____ No ___

2. Other Services: Yes___ No ___

   Describe: _____

3. Other Information: _____

4. Comments/Exceptions:
   _____

   _____

5. Permit for use granted on _____

   Proof of Liability Insurance
   Yes_____ No____

_____

Superintendent's or Designee's Signature

Date: _____