



## APPLICATION FOR USE OF SCHOOL PROPERTY By Out-of-School Entities

Date of application \_\_\_\_\_ Facility being requested \_\_\_\_\_

Name of Organization \_\_\_\_\_

Name of Contact Person / Applicant \_\_\_\_\_

Address of Contact Person \_\_\_\_\_

Phone Number(s) of Contact Person(s) \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**Date(s) and Time(s) requested** \_\_\_\_\_

**Purpose of requested facility:** \_\_\_\_\_

Name of insurance company providing Liability/Property coverage \_\_\_\_\_

(Please attach certificate of insurance **naming Guthrie Public Schools** as an additional insured party.)

Minimum Coverage: \$125,000 liability coverage for any claim arising from a single occurrence; \$1,000,000 liability coverage aggregate for any single occurrence. In addition, \$25,000 property coverage.

Is the requested use of school property a profit-making operation?       Yes       No

Will your organization require access to:

- |   |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/> Cafeteria                | <input type="checkbox"/> Gymnasium  | <input type="checkbox"/> Athletic fields |
| <input type="checkbox"/> Kitchen                  | <input type="checkbox"/> Auditorium | <input type="checkbox"/> Playgrounds     |
| <input type="checkbox"/> Other _____<br>(Specify) |                                     |  |

Will your organization need to use:

- |   |  |                                  |
|---|--|----------------------------------|
| <input type="checkbox"/> PA system                | <input type="checkbox"/> Projectors    | <input type="checkbox"/> Screens |
| <input type="checkbox"/> Spotlights               | <input type="checkbox"/> Stage scenery | <input type="checkbox"/> Piano   |
| <input type="checkbox"/> Other _____<br>(Specify) |  |                                  |

Principal's Approval \_\_\_\_\_ Date \_\_\_\_\_

Superintendent's Approval \_\_\_\_\_ Date \_\_\_\_\_

**Note: Payment for use of facilities must be received in the office of the superintendent at least seventy-two hours in advance of the approved scheduled event. Applicants must present a copy of the treasurer's receipt issued to them at the time of payment to gain access to the requested facility.**

**I have received, read, and understand the GPS School Policies G8 & G9 hereby included with this application form and agree to abide by them in every respect and detail.**

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**This form is to be signed/approved initially by the Site Principal, then submitted to Michelle Chapple, Chief Financial Officer, for Final approval. May be emailed to: [michelle.chapple@guthrieeps.net](mailto:michelle.chapple@guthrieeps.net)**