

BLOCHMAN UNION SCHOOL DISTRICT

4949 Foxen Canyon Rd, Santa Maria, CA 93454

805-937-1148 Fax: 805-937-2291

FACILITIES USE APPLICATION/PERMIT

Today's Date: _____

Organization Name: _____ Non-Profit organization: Yes No

Billing Address: _____ Phone: _____

Requestor's Name: _____ Phone: _____

Email Address: _____

FACILITY USE INFORMATION

Facility or Room: _____

Event: _____

Admission Fee: Yes No

Public Event: Yes No

Estimated Attendance: _____

Facility Arrangements: _____

Date(s) Requested Ex: Sep 14, 21, 25 ... Please Use specific Dates	Day of Week Ex: Thurs	Start Time Ex: 5:00 PM Include Set Up Time	End Time Ex: 9:00 PM

APPLICABLE FEES

Rental and cleaning fees and deposits shall be paid upon actual reservation to the Superintendent of the District. The Superintendent has the right to waive fees and deposits. The fees are as follows:

___ Room Rental \$150.00 ___ Number of Tables Requested \$3.00 Ea. ___ Number of Chairs Requested \$.50 Ea.
___ Cleaning Deposit \$200.00 ___ Additional Fees (_____)

RESPONSIBILITIES OF THE PERMITTEE

It is the responsibility of the permittee to make sure the rented room is left in a clean condition. The permittee will make sure:

- The furniture is returned to its original placement
- The lights are shut off.
- The doors and windows are closed and locked.
- The school gates are closed and locked.

REQUIRED CERTIFICATION

Permittee(s) hereby certifies that he/she is an "authorized person" of the permittee organization. Permittee further agrees that in addition to the liability of the organization, the signatory individual of the permittee agrees to also be jointly and personally liable for all costs and liabilities.

REQUIRED HOLD HARMLESS AND INDEMNIFICATION

I, _____ and _____ (names of signatory) Individual and Organization, Permittee agree to both personal and joint liability as an organization to indemnify, hold harmless and defend the Blochman Union School District and each of its officers, officials, employees, volunteers and agents from any and all loss, liability, fines, penalties, forfeitures, costs and damages.

ACKNOWLEDGEMENT AND AGREEMENT

I have read the above and agree to the terms.

Application/Permittee Signature: _____ Date: _____

DISTRICT USE ONLY

_____ Insurance Endorsement Received

_____ Facility Available on Date

_____ Fees Received

_____ Appropriate Activity

District required restrictions: _____

District official Signature: _____ Date: _____