

GIRARD USD248 - Agreement for Use of Facilities

Group Representative:			
Phone Number:			
Nature of Activity:			
Request for use of the:			
Date(s) Requested:			
Time(s) Requested:			
Number Expected:			
Organization Representative's Signature		Date	
Approved by: Chris	Date		

It is the policy of the board to grant and encourage maximum use of school facilities by responsible individuals and properly organized groups throughout the district so long as these activities do not interfere with the regular school program.

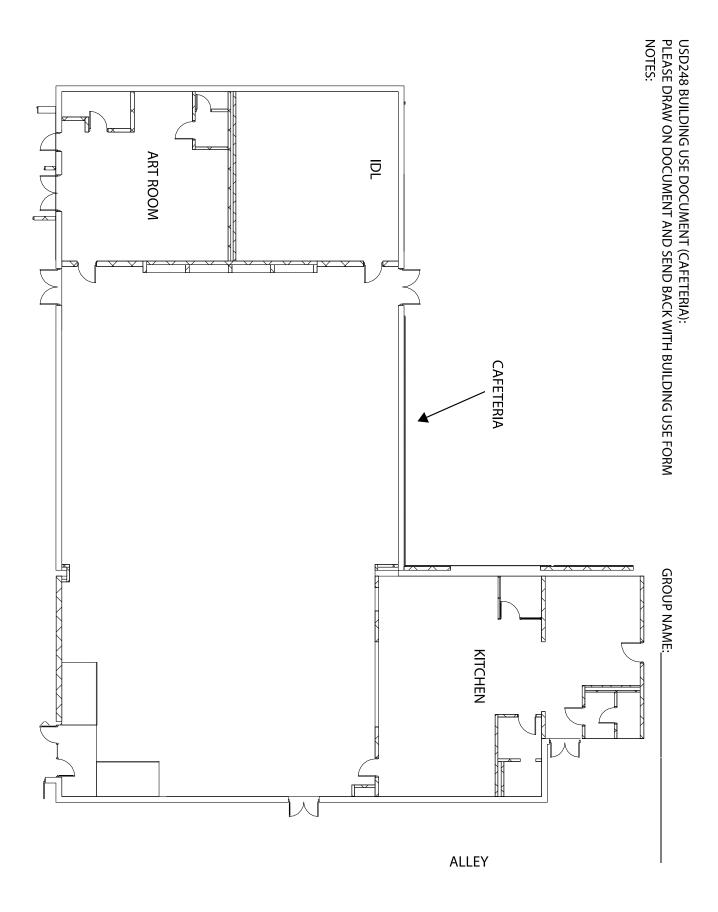
- 1) Use of the facility will be confined to the stated purpose. Users will be responsible for all persons entering the building regardless of whether or not they are members of that group.
- 2) Use of alcoholic beverages and disorderly conduct will be **prohibited**.
- 3) By law **smoking** or the use of **smokeless tobacco** is **not permitted** anywhere in the building.
- 4) Any damage to the building or contents will be paid for by the requesting group.
- 5) Cleaning of the area used is the responsibility of the requesting group.
- 6) **No food or drinks** are allowed in the building outside of the cafeteria.
- 1) Unless other arrangements are made with the Superintendent of Schools, we require that a custodian(s)/staff member(s) be present during your meeting and to clean up afterwards. There will be a charge of \$____25___ per hour for each custodian/staff member used. The number of custodians/staff members needed will be determined by the group size.

SPECIAL REQUESTS FOR BUILDING USAGE

ditorium	(Pieuse	Circle)	
		Nie	
 special lighting for the auditorium 		No	
a presiding table on the floor?	Yes	No	
a speaker stand/podium?	Yes	No	
a microphone?	Yes	No	
projection system?	Yes	No	
 If yes, organization will need 	· ·		
 If yes, please explain compute etc.) 	er or connection type (PC, Ma	acBook, iPad, Chromebook) (VGA, HDMI, (USB-C,
sound system?	Yes	No	
large flags and standards?	Yes	No	
• piano?	Yes	No	
eteria	. 55		
use of the kitchen?	Yes	No	
will you be cooking?	Yes	No	
will you need a special cleared ar		No	
will you need chairs set up?	Yes	No	
if you need chairs, how many			
o do you need them arranged?		hed)	
will you need tables set un?	Vec	No	
 will you need tables set up? 	Yes	No	
 if you need tables, how many 	?		
 if you need tables, how many do you need them arranged?	? (see Blank Cafeteria Layout attac	hed)	long t
 if you need tables, how many do you need them arranged? We can seat 300 people at a dinn 	? (see Blank Cafeteria Layout attac ner or luncheon (5 per table)	_{hed)} . Additional chairs can be placed a	long t
 if you need tables, how many do you need them arranged? We can seat 300 people at a dinn sides of the room. This will neces 	? (see Blank Cafeteria Layout attac ner or luncheon (5 per table) sitate eating in shifts for nu	hed) . Additional chairs can be placed a mbers over 300.	long t
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RELEASE, INDEMNIFICATION, AND HOLD HARMLESS AGREEMENT

in consideration of being granted permission to use	USD 248 facilities including but not limited to	
GHS/GMS auditorium, classrooms, and/or cafeteria on		
	(Date)	
Crawford County, Kansas, I,		
(Printed Name of Individua	I & Position)	
of		
(Printed Name & Address of Business/Organi	zation)	
do hereby release discharge USD 248 Girard schools, Kansa	s and its agents, employees, and representatives	
from any and all actions, causes of action, claims, demands,	judgments, damages, liability, cost and expenses	
(including without limitation attorneys' fees and litigation e	xpenses), which may result, directly or indirectly,	
due to my negligence or intentional actions or inactions aris	sing out of my operation of the facilities of USD 248	
on in Girard, Crawford County, Kans	sas, and its agents, employees, and representatives	
harmless from any and all actions, causes of action, claims,	demands, judgments, damages, liability, cost and	
expenses (including without limitation attorney fees and lit	igation expenses), which may result, directly or	
indirectly, due to my negligence or intentional actions or in	actions arising out of my operation of the facilities	
of USD 248 on in Girard, Crawfor (Date)	d County, Kansas.	
I further understand and agree that this release, ind	emnification and hold harmless agreement shall be	
binding upon my heirs, executors, administrators, trustees,	personal representatives, agents, successors and	
assigns.		
Business/Organization Name:	Date:	
Signature of Participant:		
Email:	Cell Phone:	



BOE Office: Girard USD 248 | 415 N. Summit St. | Girard, KS 66743 | 620.724.4325