

## USD 306 FACILITY USAGE REQUEST

Thank you for expressing an interest in using the facilities available at USD 306 Southeast of Saline. In order to better serve all requests, this form is provided to give you information about how to make a facility use request, the expectations for using USD 306 property and the fees assigned for using the facility.

Please note the following:

1. Complete the first page only of the attached form. You need to provide contact names and phone numbers.
2. Please be specific in identifying the rooms or other areas of the facility you would like to use.
3. USD 306 Board of Education policy requires that a custodian and/or administrator be in the building during most events. In these cases, a custodian will be assigned specifically to your event and the applicable fees will be assessed.
4. USD 306 Board of Education policy requires that an insurance binder be provided for most events. This document, if required, must identify USD 306 as being covered and must be forwarded to the school prior to the event.
5. Please review the confirmation notice you will receive once your request has been processed. If you see errors or have any questions, please call us. We would also request that you contact us prior to your scheduled event day to confirm arrangements.

It is our intent to provide a clean and safe environment for our students and patrons. Your assistance in monitoring and supervising your event is greatly appreciated so that others may also benefit from our facility.

Please return this form to Lynn Blaha:

[www.lblaha@USD306.Com](mailto:www.lblaha@USD306.Com)

Phone: 785-536-4346 Ext. 254

Fax: 785-536-4292

Mail: Southeast of Saline

5056 E. K-4 Hwy.

Gypsum, KS 67448

# USD 306 SOUTHEAST OF SALINE FACILITY USE REQUEST

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

Sponsor \_\_\_\_\_  Profit  Non-Profit

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Purpose For Request \_\_\_\_\_

\_\_\_\_\_

Date(s) of event \_\_\_\_\_

Time of event \_\_\_\_\_

List the rooms or areas of the facility you are requesting to use

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Identify any special needs/equipment you may need

\_\_\_\_\_

\_\_\_\_\_

\*\*If applicable, user agrees to provide insurance binder in amount of \$500,000 per event with USD 306 co-covered.

\*\*User hereby agrees to forever discharge and release the District, its successors and assigns, from any and all debts, claims, demands, damages, actions and causes of action whatsoever, which may result from the use granted hereunder.

\*\*User shall not in any way damage or permit damage to the premises or any portion thereof and if such damage shall occur, user shall be fully liable to repair the damaged property.

\*\*If applicable, user shall be charged a usage fee at the rate reflected on the Facility Fee Schedule.

Date \_\_\_\_\_  
USD 306

Date \_\_\_\_\_  
User or Applicant

\_\_\_\_\_  
Building Principal

\_\_\_\_\_  
Applicant

