

REGIONAL SCHOOL UNIT 26
Office of Building Facilities
10 Goodridge Dr., Orono, ME 04473
Telephone: 207-866-7110 x102 Fax: 207-866-4217
Email: bfournier@rsu26.org

APPLICATION FOR USE OF SCHOOL FACILITIES

School Requested: _____ Application Date: _____

Organization Name: _____ Non-Profit/501c3 Status: _____

Purpose of Rental: _____ # of Attendees: _____

Applicant Name: _____ Position/Title: _____

Applicant Address: _____ Phone Number: _____

E-mail Address: _____ Cell Ph. Number: _____

Room or Facility: _____ Date: _____ Hours: _____ AM/PM _____ AM/PM

Room or Facility: _____ Date: _____ Hours: _____ AM/PM _____ AM/PM

Room or Facility: _____ Date: _____ Hours: _____ AM/PM _____ AM/PM

Additional Services Needed: (tables, chairs, lighting, audio, etc.) _____

CERTIFICATE OF LIABILITY INSURANCE REQUIREMENTS

A certificate of insurance must be provided naming RSU 26 Board of Education as additional insured parties and must indicate Limits of Liability of at least \$1,000,000.00. Third party contractors must provide same coverage's.

HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

The _____ hereby agrees to indemnify and hold harmless the RSU 26 School Board, its officers, agents and employees from any and all liability, claims, costs and attorney's fees arising out of the use of Board property and further agrees to indemnify and hold harmless the RSU 26 School Board, its officers, agents and employees from any and all liability, claims, costs and attorney's fees if the event does not take place for any reason or if the requested permit is revoked by the RSU 26 Superintendent of Schools.

The _____ does hereby agree to recognize and comply with all RSU 26 AC Non-Discrimination policies.

The _____ agrees to reimburse the RSU 26 District for any and all damages, consequential or otherwise, if the event does not take place for any reason whatsoever, or if the requested permit is revoked at the sole discretion of the RSU 26 Superintendent of Schools.

By signing this Application for Use of School Facilities, applicant is acknowledging and agreeing to on behalf of the Organization to all Rules, General Regulations, Terms and Conditions listed on the reverse side or separate page and to the above Liability Insurance Requirements, the Hold Harmless and Indemnification Agreement and to the RSU 26 School Board Facilities Use Policy KF and Non-Discrimination Policy AC.

Print Name: _____ Applicant Signature: _____ Date: _____

\$25.00 DEPOSIT IS DUE UPON FORM SUBMISSION

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FOR SCHOOL USE ONLY

Principal Approval: _____

Availability: Yes ____ No ____

Athletic Director: _____

FOR CENTRAL OFFICE USE ONLY

Application Approved _____
Director of Facilities

Not Approved: _____
Director of Facilities

Director of Food Services (if applicable)

Business Manager (if applicable)

Billing Estimate: Actual charges may differ from estimate based upon required amount of time facility is used and time required for clean areas used. Custodial time charged will include any time required to return the areas used to "ready for school" condition.

Rental estimate for _____ (location): _____ hours @ _____ per hour

Rental estimate for _____ (location): _____ hours @ _____ per hour

Custodial staff estimate _____ hours @ _____ per hour

Kitchen staff estimate _____ hours @ _____ per hour

Other _____ Estimate _____ hours @ _____ per hour

TOTAL Estimate: \$ _____

FINAL BILLING SUMMARY

Billing/Payment:

Deposit Amount Rec'd _____ **Date Rec'd:** _____

Final Amount Billed: _____ **Date Billed:** _____ **Date Received:** _____

\$25.00 DEPOSIT IS DUE UPON FORM SUBMISSION