

MANTECA UNIFIED SCHOOL DISTRICT

Facilities Department • P.O. Box 32 • 2271 West Louise Avenue • Manteca, CA 95336 • 209-858-0861 • 209-858-7533 FAX

USE OF FACILITIES APPLICATION AND AGREEMENT

This Form Must Be FULLY COMPLETED Before Processing

	NAME OF PARTY FINANCIALLY RESPONSIBLE
	NAME OF ORGANIZATION
	MAILING ADDRESS
	CITY, STATE, ZIP

SCHOOL SITE REQUESTED: _____

- | | | | | |
|--|--|---|--|---|
| <input type="checkbox"/> Elementary Gym | <input type="checkbox"/> Speech Arts Bldg. | <input type="checkbox"/> Stadium | <input type="checkbox"/> Field Lights | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> High School Large Gym | <input type="checkbox"/> Lindbergh Auditorium | <input type="checkbox"/> Athletic Field | <input type="checkbox"/> Practice Field Lights | <input type="checkbox"/> District Office |
| <input type="checkbox"/> High School Small Gym | <input type="checkbox"/> Restrooms | <input type="checkbox"/> Baseball Diamond | <input type="checkbox"/> Parking Lot | <input type="checkbox"/> Classrooms # _____ |
| <input type="checkbox"/> Multi Purpose Room | <input type="checkbox"/> Multi-Purpose w/Kitchen *Requires a Food Services Employee at an Additional Fee | | | <input type="checkbox"/> Other _____ |

Special Requests: _____

DATES REQUESTED: _____

SPECIFIC TIME NEEDED: _____ (2 HOUR MINIMUM REQUIRED)

Circle Applicable Days: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Purpose of Event: _____

Expected Attendance: _____ If food is being sold or served explain: _____

If non-profit organization provide non-profit status and identification number: _____

F A C I L I T I E S S T A F F O N L Y

FEE COMPUTATION

Classification:	Class I - No Rental Fee	Modified Class II- Youth Groups	Class II - Churches and Universities	Class III - "Fair Rental Value"
Location on Site:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
Electrical/Gas:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
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Electrical/Gas:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
Location on Site:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
Electrical/Gas:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
Additional Services:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
Additional Services:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			
MUSD Staff Services:	_____ = \$ _____ per hour at _____ hours, for _____ days = \$ _____			

TOTAL FEE: \$ _____

Payment Date: _____ Total Cash/Check: _____ Check Number: _____ Receipt Number: _____

Insurance Company: _____ Date Approved by Risk Management: _____ Expiration Date: _____

Comments: _____

I ACKNOWLEDGE THAT ALL FEES SHALL BE SUBMITTED TO THE FACILITIES DEPARTMENT NO LATER THAN 2 WEEKS PRIOR TO THE DATE OF THE EVENT NOTED ABOVE.
I FURTHER ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE RULES GOVERNING THE USE OF DISTRICT PROPERTY AS STATED ON PAGE 2.

SIGNATURE OF PARTY FINANCIALLY RESPONSIBLE	DATE	PHONE NUMBER(S)	EMAIL ADDRESS
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SITE ADMINISTRATOR CONFIRMING AVAILABILITY	DATE	FACILITIES DEPARTMENT	DATE
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APPLICANT'S PROCEDURES AND REGULATIONS FOR USE OF FACILITY

It is the applicant's responsibility to provide the following forms and information before the event. Please allow a minimum of 4 weeks to process the application. All insurance requirements must be met before an application can be approved.

- 1. Complete a Use of Facility Application and Agreement form.
a. Submit the completed usage form to the school site you desire.
b. Upon approval from the site Administrator your application will be forwarded to the District Office Facilities Department for final approval.
c. If granted approval from the Facilities Department, you will be contacted.
2. Submit a Certificate of Liability Insurance and Additional Insured Endorsement to the District Office Facilities Department.
a. Certificate of Liability Insurance (ACORD 25) SIGNED BY THE INSURER'S REPRESENTATIVE.
i. List the "Certificate Holder" as follows: Manteca Unified School District, Attn: Facilities Department, P.O. Box 32, Manteca, CA 95336
ii. Comprehensive General Liability with limits of \$1,000,000 combined single limit per occurrence and \$2,000,000 aggregate is required.
iii. Under Description of Operations describe your activity.
iv. 30-day Notice of Cancellation is required.
v. Proof of Workers' Compensation (waiver of subrogation to be part of this coverage) -if applicable.
b. An Additional Insured Endorsement (Form Number CG 2011 - Additional Insured Managers or Lessors of Premises, or its direct equivalent) must accompany the Certificate of Liability Insurance.
i. List the "Additional Insured" as follows: Manteca Unified School District its Governing Board, its Officers, its Agents, its Employees and its Volunteers are named as Additional Insured with respect to Liability.
ii. The Additional Insured Endorsement should indicate the effective date, policy number, and the name of the insurance carrier.
iii. The coverage shall be primary and non-contributory with respect to general liability and waiver of subrogation for workers' compensation (if applicable).

School property must not be used for the commission of any act prohibited by law, or which is inconsistent with their use for school purposes, or which interferes with the regular conduct of school or school work. In addition, any use which involves the possession, consumption, or sale of alcoholic beverages or any restricted substances on school property shall not be permitted. Any individual who signs the application will be financially responsible.

HOLD HARMLESS AGREEMENT: The above-named Organization and its members shall be held responsible for any and all loss, accident, neglect, injury or damage to person, life or property which may be the result of, or may be caused by the Organization's occupancy of the facilities or premises, and for which the District might be held liable. The Organization shall protect and indemnify Manteca Unified School District, its Governing Board, its Officers, its Agents, its Employees and its Volunteers and save them harmless in every way from all suits or actions at law for damage or injury to persons, life or property that may arise or be occasioned in any way because of the occupancy of the facilities or premises, regardless of responsibility or negligence. The applicant agrees to furnish such liability or other insurance for the protection of the public and the District as the District may require.

LIFEGAURD CERTIFICATES: Manteca Unified School District requires lifeguard certificates prior to the use of swimming pools.

Use of MUSD facilities by outside organizations will not take place at the expense of the regular school programs. Manteca Unified School District reserves the right to cancel all activities due to inclement weather or other emergencies.

Buildings will be opened (only when given evidence of approved permit), attended and closed by an authorized employee of the District.

Payment for Use of Facilities will be collected upon approval from the District Office. Fees will be determined by classification and will include rental, staffing and energy costs. Full payment shall be received no later than two weeks prior to event. All cancellations must be submitted in writing to the District Office Facilities Department no later than one week prior to the event in order to be eligible for a refund (a processing fee of \$25.00 will be retained).

THE UNDERSIGNED UNDERSTANDS THE PROCEDURES, REGULATIONS AND TERMS OF THIS AGREEMENT AND IS AUTHORIZED TO SIGN THIS AGREEMENT ON BEHALF OF THE ORGANIZATION.

Signature of Financially Responsible Party: _____ Date: _____