



Bonnie Garrett, Facility Use Coordinator
Facility Use Office, c/o Austell Intermediate School
5243 Meadows Road, Powder Springs, GA 30127
Phone: 678-398-5102
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SCHOOL USERS REQUEST FOR FACILITY USE

SCHOOL REQUESTING USE:

SCHOOL: _____

RESPONSIBLE PARTY: _____

ADDRESS: _____

PHONES: Work _____ Home _____ Cell _____ Fax _____

EMAIL: _____ SCHOOL REQUESTED: _____

DATES REQUESTED:

TIMES REQUESTED:

TYPE OF ACTIVITY:

NUMBER OF PARTICIPANTS: _____

AREAS REQUESTED:

SPECIAL REQUEST BY GROUP:

IF BEING REQUESTED BY A SCHOOL BOOSTER CLUB, FOUNDATION, OR PTA/PTSA:

Name of Requesting Organization:

Responsible Person/Contact:

I (Please Print) _____ certify that I am an officer in the above named group/organization and that I am authorized to execute this agreement to use the above-mentioned facility. I further certify that I hereby bind our group/organization to abide by all the policies and regulations of the Board of Education and to work directly with the local school principal to assure compliance of all activities associated with such use. I understand that our group/organization will work through the school principal to gain approval and scheduling of any areas used for our activities. A log of these activities will be kept by the school principal and attached to this agreement reflecting all dates, times, areas used and record of fund raising activities held on campus.

Compliance with Policies and Procedures: This Agreement is expressly subject to and conditional upon my organization's complying with Cobb County School District's Administrative Rule KF (Use of School Facilities)*, which Rule is hereby incorporated into this Agreement as additional terms. In the event of any conflict between terms of this Agreement and Rule KF, the Administrative Rule shall control.

The group(s)/organization(s) listed within hereby release the Cobb County School District and its employees from any and all damages to persons or property during its use of said building, grounds, and equipment. The group/organization also agrees to indemnify and hold harmless the District and its agents, against any and all claims which may be made against the District, or its agents, for property damage or personal injuries sustained by any persons including groups or organizations and groups' or organizations' privies, which may result from the use of said building, grounds or equipment by this/these group(s)/organization(s). The indemnifications herein agreed to by the group(s)/organization(s) shall include use of said building, grounds or equipment by the group(s)/organization(s). The group(s)/organization(s) agrees to indemnify the District for any and all claims against Cobb County School District or any of its agents, servants, volunteers, or employees arising out of the group/organization's use of District building, grounds or equipment, however caused.

By _____
Group Representative Title Date

Request Submitted by: _____
Signature of Principal of School Requesting Use Date

SCHOOL SUBJECT TO REQUEST FILLS IN THE INFORMATION BELOW

Facility Use Approved? Yes _____ No _____

If not approved, please state reason: _____

Is Paid Supervision Required? Yes _____ No _____

If yes, Supervisor's Name _____

Is Paid Clean-up Required? Yes _____ No _____

If Yes, Set-up Clean-up Hours Needed*** _____

If Yes, Person Responsible for Clean up: _____
(If different from Supervisor)

*** (If set up or cleanup is required, please indicate the number of hours needed for this purpose. These hours would be in addition to the number of hours of supervision that would be required.)

Signature of Principal of School Subject to Request

Date

Please Fax to: (678) 398-5103

FACILITY USE ONLY

Supervision Fee Calculation: _____

Clean-up Fee Calculation: _____

TOTAL FEES DUE: _____

Facility Use Coordinator Signature (to be signed upon completion)

Date

5/5/09