

AMADOR COUNTY UNIFIED SCHOOL DISTRICT
AGREEMENT FOR USE OF FACILITIES / EQUIPMENT

School Site: _____ Application Date _____

Name of Organization _____

Multi-Purpose Room _____ Kitchen _____ Classroom(s) _____ Other _____

Month _____ Day(s) of Month _____ Time(s) _____ No. of Attendees _____

Facility will be furnished "AS IS" unless requests for furniture and equipment are indicated below. If equipment is available, a fee for its use may be assessed by the Business Office. Kitchen use must be cleared first through Food Services Department for safety purposes and may incur additional fees.

Equipment or Furniture Needed (Fee may be charged): _____

1. What is the purpose of facility use? _____

2. Is admission charged? _____ If so, how much? _____ 3. Is supervision by District personnel necessary? no yes.

All permissive users, whose use is not mandated by the civic center act, agree by their signature below to hold the Amador County Unified School District/Office of Education, its governing board and the individual members thereof and all district officers, agents and employees free and harmless from any loss, damage, liability, or expense that may arise out of, or in any way be connected with this facility use agreement including non-availability of the facility due to "acts of god", rolling power blackouts or other causes beyond the control of the district. However, this waiver does not pertain to losses or injuries that are the result of the sole negligence of the district.

Name of Authorized Representative/Agent (please print) _____

Signature of Representative _____

Address: _____ City _____ Zip _____

Work Phone: () _____ Other Phone: () _____ E-mail: _____

Applicant must submit this form to the Site Administrator fifteen (15) working days prior to the date of use to ensure time for processing. Applicant acknowledges that the District's willingness to rent this facility is contingent upon approval by the Site Administrator and by the District's Business Services Department. **Permission will not be granted until the applicant submits a certificate(s) of insurance and additional insured endorsement naming the District as additional insured.** The insurance papers should be sent to Karen Huffman, Maintenance Dept., A.C.U.S.D., 217 Rex Avenue, Jackson, CA 95642, fax # (209) 257-7785, phone # (209) 257-7786.

The user will be responsible for any damage to buildings or equipment resulting from this use.

1. Do not drive nails or tacks into walls, do not pin anything on curtains/drapes, do not use scotch tape on painted surfaces.
2. Clean up all spillage, deposit litter in trash cans, return furniture to original positions.
3. Turn off all equipment used. Turn off lights and lock all doors.
4. Return keys or other equipment as soon as possible.



***Note:** Amador County Unified School District has a 'tobacco free' policy which shall be a condition for use of all district property including athletic fields.

APPLICANT: PLEASE DO NOT WRITE BELOW THIS LINE

TO THE SITE ADMINISTRATOR: This request must be submitted to Business Services ten (10) working days prior to event to ensure that necessary processing may be completed. Your signature indicates that the above request will not conflict with the education program and that the facility is available at the time requested.

Administrator's Signature _____ Date _____

Date app. received by business office _____ Insurance received _____ Approved Not Approved _____

DEPOSIT: \$ _____ FEE: \$ _____ (Make check payable to Amador County Unified School District) Business Office initials _____

Maintenance Approved Not Approved Maintenance initials _____

Maintenance Comments: _____