



Request for Use of School Facilities

NOTICE: Persons using the facilities are responsible for leaving the buildings and grounds in the same manner as they were provided to them, i.e., clean and free from trash and debris. There is to be no tobacco products and the consumption of ALCOHOLIC BEVERAGES is PROHIBITED on the grounds and within the buildings.

Name of Organization: _____ Date: _____

Name of individual representing organization to be present and responsible during event: _____

Federal Tax ID (if applicable): _____

Liability Insurance Information:

Insurance Agency: _____ Policy: _____ Exp. Date: _____

Name of School Requested: _____ Area(s) of Building Desired: _____

Date(s) Requesting: _____ Opening Time: _____ Closing Time: _____

Estimated Attendance: _____

Purpose for which facilities are to be used (describe fully, use separate page if necessary):

I, the undersigned applicant, have read the Rock Hill Schools Board of Trustees Policy KF and Administrative Rule KF-R and accept and agree to abide by this policy and procedures. Specifically, I understand and accept the terms and conditions of use of said policy and procedures with regard to limitations and indemnification of damages and liability. I understand my group is solely and exclusively responsible to provide all security services related to its use of school facilities and my group indemnifies and holds the Board of Trustees harmless against any claim for failure to provide adequate security. The Rock Hill Schools Board of Trustees, through the Superintendent or designee, reserves the right to cancel this agreement whenever it deems such action advisable and in the best interest of the school system; or to modify or change its rules at any time with or without cause. If cancelled, there shall be no claim or right whatsoever to damages or reimbursement on account of loss, damage or expenses, except full refund of payments made in advance.

Signature: _____ Print name: _____

Address: _____ Telephone: _____

Email: _____

Approved: _____ Date: _____
(Facilities Use Coordinator)

Approved: _____ Date: _____
(Principal/Director)



Applications are reviewed by the Facility Use Coordinator then submitted to the schools for approval in order to avoid conflicts with school-scheduled activities. Please allow approximately 10 business days to receive the result of your request.

In order to start the application process we must have the following:

- 1) **Completed Application Form**
- 2) **Application Fee of \$50.00** -mailed or delivered in person to:
Facilities Services
2171 West Main Street
Rock Hill, SC 29732
Payment must be made with check or money order payable to **Rock Hill Schools**.
- 3) **Event Worksheet**

If approved, we must have the following 10 days prior to event:

- 1) **Certificate of Liability Insurance**
The certificate must specify the effective date of the general liability policy. These dates must cover the date(s) being requested for the use of RHSD facilities.
Limits of coverage shall be indicated on the Certificate of Insurance as follows: *All non-school-affiliated groups shall be required to pay the pro rata cost of insurance for extended coverage, fire, and vandalism on building and contents to the extent of the full insurable value and will be required to furnish a comprehensive general liability insurance policy including contracted coverage in an amount not less than \$1,000,000 per occurrence and \$2,000,000 annual aggregate and fire legal property liability, and \$75,500 for property damage with no deductible, with an insurance company authorized to do business in South Carolina, naming the school district as an additional insured or Certificate Holder.*

- 2) **Invoice Payment** -mailed or delivered in person to:
Facilities Services
2171 West Main Street
Rock Hill, SC 29732
Payment must be made with check or money order payable to **Rock Hill Schools**.

**For all inquiries, please contact:
Glenette Neal
Facility Use Coordinator
803-981-1151 / Gneal@rhmail.org**



Facility Rental Event Worksheet

Organization: _____

Contact Information : _____ (name)

_____ (phone)

Requested Date(s): _____

General:

	<u>Yes</u>	<u>No</u>
Will the event be open to the public?	<input type="checkbox"/>	<input type="checkbox"/>
Will an admission fee be charged for the event?	<input type="checkbox"/>	<input type="checkbox"/>
If event is a fundraiser, will 100% of funds raised be donated to the school district?	<input type="checkbox"/>	<input type="checkbox"/>
Will the event be a tournament or competition type of event?	<input type="checkbox"/>	<input type="checkbox"/>
Will rebounding devices (bounce houses and other inflatable devices), portable rock climbing walls, amusement rides, canopies, tents, or portable restrooms be used during the event?	<input type="checkbox"/>	<input type="checkbox"/>
Will food/drinks/merchandise/other items be sold at the event?	<input type="checkbox"/>	<input type="checkbox"/>
Setup requirements:		
List specific areas requested to be used for the event (including hallways, restroom areas, concession areas, parking and other outdoor areas):		

Gymnasium Use:

	<u>Yes</u>	<u>No</u>
Will the use of the scoreboard be needed?	<input type="checkbox"/>	<input type="checkbox"/>
Will the use of the sound equipment be needed?	<input type="checkbox"/>	<input type="checkbox"/>
Will basketball goals need to be down for the event?	<input type="checkbox"/>	<input type="checkbox"/>
Will special floor covering be needed?	<input type="checkbox"/>	<input type="checkbox"/>
Will bleachers need to be pulled out for spectators?	<input type="checkbox"/>	<input type="checkbox"/>
Will the use of the locker rooms be needed?	<input type="checkbox"/>	<input type="checkbox"/>
Will an Athletic Trainer be working the event?	<input type="checkbox"/>	<input type="checkbox"/>

Auditorium/ Conference Room/ Media Center Use:

	<u>Yes</u>	<u>No</u>												
Will the use of the school's Audio/Visual equipment be needed? If yes, please check the types of equipment. <table border="1" data-bbox="350 296 1057 527"><tbody><tr><td>Data Projector</td><td></td></tr><tr><td>Microphone</td><td></td></tr><tr><td>Multiple Microphones</td><td></td></tr><tr><td>Podium</td><td></td></tr><tr><td>Auditorium Stage Lighting</td><td></td></tr><tr><td>Stage Risers</td><td></td></tr></tbody></table>	Data Projector		Microphone		Multiple Microphones		Podium		Auditorium Stage Lighting		Stage Risers			
Data Projector														
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Podium														
Auditorium Stage Lighting														
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Will dressing rooms be needed?														
Will theatre curtains or a stage back drop need to be used?														
Will special stage floor covering be needed for the event?														

Stadium Use:

	<u>Yes</u>	<u>No</u>						
Will the event include tailgating in the parking area?								
Will an athletic trainer or EMS be working the event?								
Are you requesting access to the Press Box? If yes, please check the types of equipment. <table border="1" data-bbox="350 1194 1057 1310"><tbody><tr><td>Scoreboard</td><td></td></tr><tr><td>Sound Equipment</td><td></td></tr><tr><td>Play Clock</td><td></td></tr></tbody></table>	Scoreboard		Sound Equipment		Play Clock			
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