

CLINTON-MASSIE BUILDING USE/RENTAL REQUEST FORM

Date of Application: _____ Class: _____

Name of Individual or Group: _____

Address: _____

Name of Individual making request: _____

Address: _____

Phone: _____ Cell: _____ Email: _____

Which facility are you requesting? _____

Activity to be conducted: _____

Exact Dates and Times Facility is Desired:

DATE

TIME (From-To)

Rental Rates are as follows:

- A. **Tier I:** School related organizations – No Rental Fee (Examples: PTO, Music Boosters, Sports Complex Committee, etc.)
- B. **Tier II:** General Community organizations – Rental fees and employee charges may apply. (Examples: Scouts, Knothole Baseball, PeeWee Football, etc.)
- C. **Tier III:** All Other Organizations – Rental fees and/or employee rates will apply.
 - 1. **Classroom: \$25/hr.**
 - 2. **Large Areas: Auditoria, Cafeteria, Gyms, Turf: \$75/hr. Turf with lights: \$100/hr.**
 - 3. **Ball Fields: \$50/hr.**

Equipment/Services Needed: (Charges to be completed by the building principal/designee or Superintendent)
\$28/hr. for Custodial workers **\$17/hr.** for Kitchen workers **\$25/event** for Technology (microphone, cable, projector)

Custodial: _____ Kitchen: _____ Technology: _____

Access to the building will be set electronically based on the information provided on this form.

I have read and agree to follow the guidelines for the Use and Rental of Clinton-Massie School Facilities and agree to identify and hold harmless Clinton-Massie Board of Education and their agents and employees from all liability, claims, demands, damages or cost for or arising out of above group using Clinton-Massie facilities whether it be caused by negligence of indemnitor or Clinton-Massie Board of Education or either party's agent or employees, or otherwise.

Signed: _____ Date: _____

For Office Use Only

Approved: _____ Date: _____

Not Approved: _____ Date: _____

Reason: _____

By: _____

Title: _____

Date Payment Received: _____

Received By: _____

A.D.: _____

Treasurer: _____

A.D.: _____

Support Staff Supervisor: _____

Technology Coordinator: _____

A.D.: _____