GREENVILLE PUBLIC SCHOOL DISTRICT

GREENVILLE, MISSISSIPPI

**APPLICATION FOR USE OF SCHOOL FACILITY**

Application must be completed 10 business days prior to event.

**DATE OF APPLICATION** **DATE REQUESTED**

Circle facility desired and fill in dates, opening hour, and closing hour. The rate is established on the basis of a three (3) hour session and **DOES NOT** include custodial, security guard, and other services deemed necessary by the Business Office and are the responsibility of the applicant**. Upon approval of the application, a $1,000,000 Commercial General Liability Insurance policy is required for each day(s) requested during the use of any school facility.**

Total cost will be calculated in the last column by the Business Office when application is received. The rate for each additional hour or major infraction thereof shall be 50 percent of the three (3) hour rate. Opening and closing hours should include times needed for all decorating, arranging, and other pre and post function work.

Stadiums: Rental fees for the stadiums shall be determined by, handled by and payable to the Greenville Public School District.

GREENVILLE PUBLIC SCHOOL DISTRICT

GREENVILLE, MISSISSIPPI

Payment for the use of any facility shall be by cash, cashiers’ check, or money order and shall be made no later than three (3) days prior to the date of the use of facility. If no payment is forthcoming under these terms, the contract becomes null and void.

The applicant understands that upon failure to comply with the Greenville Public School District Policy KG/DEO/EBF and any or all of the conditions stated therein, the Board of Trustees of the Greenville Public School District or its designee may terminate and cancel all privileges of the undersigned representative or group to use said facilities and/or equipment provided therein, but any failure to terminate such privileges for the breach of said conditions within any particular time period shall not constitute a waiver of rights to do so for any specified breach or as to any other violation of said requirements.

Furthermore, as authorized by Board policy, the undersigned applicant understands that he shall be responsible for the cost of any repairs and/or replacements necessary due to any damage or destruction resulting from the use of said building or equipment.

Policy KG/DEO/EBF is hereto and incorporated as part of this application.

GROUP OR ORGANIZATION NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REPRESENTIVE NAME(PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REPRESENTATIVE SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FACILITY REQUESTED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIPTION OF ACTIVITY (BRIEF DESCRIPTION OF THE ACTIVITY)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please answer the following questions:

Will admission be charged? \_\_\_\_\_\_\_\_ Will Funds be solicited? \_\_\_\_\_\_\_\_ Will merchandise be sold? \_\_\_\_\_\_\_\_\_

Estimated number of participants: Adults \_\_\_\_\_\_\_\_ Children under the age of 18 \_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Facility** | **Dates** | **Open** | **Close** | **Rate** | **Total Hours** | **Cost** |
| **Coleman / Weston** |  |  |  |  |  |  |
| Auditorium Performance |  |  |  | $150 |  |  |
| Auditorium Practice |  |  |  | $100 |  |  |
| Gymnasium |  |  |  | $200 |  |  |
| **Greenville High School** |  |  |  |  |  |  |
| Auditorium Performance |  |  |  | $200 |  |  |
| Auditorium Practice |  |  |  | $150 |  |  |
| Gymnasium |  |  |  | $300 |  |  |
| **Manning Curriculum Center** |  |  |  | $200 |  |  |
| **Technical Center** |  |  |  | $200 |  |  |
| **Other GPSD Facility****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  | $150 |  |  |
| **Total Cost** |  |  |

**For office use only:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant Business Manager Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent’s Date

**Certificate of Insurance Attached: Yes \_\_\_ No \_\_\_ Payment Received: Yes \_\_\_\_ No \_\_\_ Waived \_\_\_\_**

Request for Fee Waiver Explanation (if applicable)

Superintendent/Designee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return Application to: Business Office, 412 South Main Street, Greenville, MS 38701**