



CROSSROAD ACADEMY CHARTER SCHOOL OF BUSINESS



470 Strong Road | Quincy, FL 32351 | Ph (850) 875-9626 | Fax (850) 875-1403

@iamcacs | www.mycacs.com | www.facebook.com/iamcacs

Kevin E. Forehand, Principal

All information must be furnished before application can be processed. Application must be filed with the school principal NOT LESS THAN 15 WORKING DAYS BEFORE INTENDED USE.

1. Activity Date(s):	Day of the Week	Building to be open	Closed
_____	_____	_____ am/pm	_____ am/pm
_____	_____	_____ am/pm	_____ am/pm
_____	_____	_____ am/pm	_____ am/pm

2. Type of Activity: _____

3. Individual/Organization: _____

Billing Address: _____

(Street)

City _____ ST _____ Zip _____

Cell Phone: _____ Home _____ Office _____

Email _____

4. Is the organization a nonprofit type? (circle) YES NO

If yes, include documentation for your nonprofit status. [e.g. 501(c)3]

5. Will the user collect fees/admissions/donations? (circle) YES NO

Amount: \$ _____

6. Number of people projected to attend: _____

7. Requests (Check all that apply)

Facilities

____ Cafeteria
____ Cafeteria w/Kitchen
____ Classroom(s) How many? ____
____ Gymnasium
____ Other: _____

Personnel

____ Custodian
____ Cafeteria Staff
____ Sound Tech
____ Security
____ Other: _____

The undersigned agrees to pay applicable fees assessed and certifies that he or she has read, and will abide by, current Crossroad Academy Policy to include the regulations on the reverse side of this application form. The undersigned shall be liable for any and all claims or damages resulting from use of the school facility, including, but not limited to, damage to School Property by the user, as well as any costs, fees and damages resulting from the user's failure to comply with any federal, state or local law, regulation or other requirements. The undersigned shall ensure the prompt and proper adjustment of all such claims. The undersigned hereby certifies that he/she has checked the 'Sex Offender and Crimes Against Minors Registry' on the Internet and that none of the personnel involved with the entity, or the program sponsored by the entity, utilizing Crossroad Academy's facilities and/or grounds appear on the Registry as of this date.

PRINT NAME

SIGNATURE

DATE

THE SIGNATORY MUST BE 21 YEARS OF AGE OR OLDER.

All Users Shall Observe the Following Regulations:

1. User shall be responsible for all damage or loss of property and equipment specified in the request may be used. Only the principal can approve use of equipment.
2. Additional fees will be charged for the use of facilities beyond the time approved.
3. NO alcoholic beverages may be carried or consumed on Crossroad Academy Charter School (CACS) property.
4. Smoking or the use of tobacco products is prohibited in school buildings.
5. A representative(s) and/or custodian(s) of the school division must be present during the use of the facility.
6. User shall provide a Certificate of Insurability showing liability coverage for the event being held, with minimum of \$1,000,000 general liability per occurrence. The school shall be listed on the policy as an additional named insured.
7. User shall respect the right of the principal and/or Executive Director to cancel a previous commitment to rent the facility in the event it is necessary to use it for school purposes.
8. User agrees that activities will be orderly and lawful and not of a nature to incite others to disorder, and to maintain supervision and containment of the participants/event to the contracted area.
9. The sale of merchandise, food, and beverages by a non-school group must be approved by CACS principal.
10. No pets; with the exception of "service" animals.
11. Written notice of cancellations must be received by CACS principal at least five (5) working days prior to the scheduled use or rental fees may be applied.

A REQUEST MAY BE DENIED WHEN PREVIOUS USAGE WAS UNSATISFACTORY, THE ACCOUNT IS DELINQUENT OR IT IS JUDGED TO BE IN THE BEST INTEREST OF THE SCHOOL AND COMMUNITY OR WOULD RESULT IN AN UNACCEPTABLE RISK.

NOTE: 1. WHEN SCHOOLS ARE CLOSED DUE TO INCLEMENT WEATHER, ALL FACILITIES USE IS CANCELLED. USERS ARE RESPONSIBLE FOR NOTIFYING THEIR MEMBERSHIPS.
2. IN ADDITION, SCHOOLS TYPICALLY WILL NOT BE AVAILABLE FOR RENTAL DURING OFFICIAL SCHOOL HOLIDAYS.

Office use only:

ESTIMATED FEES

Facility Rental		Hours (min. 4 hrs)	Fee (per hour)		TOTAL COST	Personnel (Estimated)	Hours (min. 4 hrs)	Fee (per hour)		TOTAL COST	
			Profit	Non- Profit				Profit	Non- Profit		
1. Cafeteria			\$10	\$5	\$	1. Custodian		\$20	\$15	\$	
2. Cafeteria w/kitchen			\$15	\$10	\$	2. Cafeteria staff		\$20	\$15	\$	
3. Classroom(s) How many? _____			\$5/room per hr	\$2/room per hr	\$	3. Sound Tech		\$20	\$15	\$	
4. Gymnasium/Auditorium			\$20	\$15	\$	4. Security		\$20	\$15	\$	
5. Other: _____			\$	\$	\$	5. Other: _____		\$	\$	\$	
Subtotal					\$	Subtotal					\$
ESTIMATED PAYMENT REQUIRED IN ADVANCE FOR FACILITY USAGE (SUBJECT TO CHANGE)											\$

BILLING AND PAYMENT PROCEDURES

1. Payment of the estimated costs is required prior to usage. 4 hour minimum charge.
2. Checks must be made payable to Crossroad Academy Charter School.
3. Mail to: Facility Management Department, 470 Strong Road, Quincy, FL 32351.

___ Approved ___ Disapproved Date received: _____ Date entered: _____

Liability Insurance Certificate Received Y N Exp. Date: _____ Copy of 501 (c) 3 Received Y N

Will there be a custodian on duty? Y N Is security required? Y N

Name of approved school staff member(s) responsible for facility if no custodian/security will be on duty:

Restrictions: _____

Principal/Administrator Signature: _____ Date: _____

Executive Director Signature: _____ Date: _____

CROSSROAD ACADEMY CHARTER SCHOOL
470 Strong Rd. • Quincy, FL 32351
Phone: (850) 875-9626 Fax: (850) 875-1403