

# Facility/Building Use Application Code: KF-E



## Community Programs

Date of Request: \_\_\_\_\_

### Facility Scheduling Guidelines:

1. Check with RSU5 Community Programs for availability of space - 865-6171
2. Complete and return this form to Community Programs at least twenty (20) working days prior to scheduled use
3. Include a copy of insurance certificate (see below), naming RSU5 as an additional insured.
4. You will be notified with building assignments and usage fees (if applicable).

### **PART I: To be completed by applicant (Must be at least 21 years of age)**

Organization/Group Requesting Use: \_\_\_\_\_

Check all that apply:    \_\_\_ School group    \_\_\_ Local (defined as 75% members residents)    \_\_\_ Out-of-district  
                                 \_\_\_ Non-Profit    \_\_\_ For Profit

Dates Requested: \_\_\_\_\_ Day (s) of activity (please circle):    Mon    Tue    Wed    Thu    Fri    Sat    Sun

Arrival Time: \_\_\_\_\_ Time of Activity: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Description/type of activity or event: \_\_\_\_\_

Facility Requested:

School:    \_\_\_ FHS                    \_\_\_ FMS                    \_\_\_ MLS                    \_\_\_ MSS                    \_\_\_ PES                    \_\_\_ DCS

Room(s): \_\_\_\_\_ Parking Lot: \_\_\_\_\_

**Note:** The room you are requesting may not be the room you are assigned based on availability.

Custodial Service/Set-up needed: Number and arrangement of tables, chairs, etc. (may include additional fees):  
\_\_\_\_\_  
\_\_\_\_\_

Equipment requested for use (may include additional fees, and is subject to availability): \_\_\_\_\_

Anticipated number of attendees: \_\_\_\_\_ Person responsible on site: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening/Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Billing address: \_\_\_\_\_

**The person designated below, as the authorized representative, agrees to be present the entire time the facilities are in use, will ensure all use rules and regulations are followed and be responsible for any damage incurred. RSU5 Community Programs has a carry-in/carry-out policy. Weather-related cancellations must be rescheduled through Community Programs.**

Signature of Applicant/Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Insurance Requirement:** Any non-RSU5 or town government group requesting to use a facility must provide proof of insurance naming RSU5 as an additional insured with the following coverage: \$400,000 combined bodily injury and property damage, or \$400,000 bodily injury and \$400,000 property damage. All insurance coverage shall come from insurers licensed to do business in the State of Maine. The intent of requiring a certificate of insurance is to absolve RSU5 from damage costs and liability claims which may result during an event not directly sponsored by RSU5.

### **PART II: To be completed by RSU5 Community Programs**

Recommendation:    Approve: \_\_\_\_\_    Disapprove: \_\_\_\_\_    Date: \_\_\_\_\_

Fee Charged: \_\_\_\_\_ Security Deposit: \_\_\_\_\_ Total Payment Due: \_\_\_\_\_

Additional Comments or Conditions: \_\_\_\_\_

Signature of RSU5 Community Programs Representative: \_\_\_\_\_