



MEDINA CENTRAL SCHOOL DISTRICT

MEDINA, NEW YORK 14103

USE OF FACILITY REQUEST

COMPLETE AT LEAST 14 DAYS PRIOR TO USE

Today's date _____

SECTION A

Organization _____ Individual _____

Address _____

Telephone _____ Building requested _____

Area(s) Requested (If requesting pool, COMPLETE SECTION C) _____

For (activity) _____

Date(s) _____ Day(s) of week S M T W Th F S Time (from) _____ am pm (to) _____ am pm

Signature _____ Print name _____

Please indicate if you have any special needs (i.e. VCR, TV, overhead, sound system, lights, etc.)

SECTION B

1) _____ Your request has been granted, however, certain conditions must be met:

- a) A responsible adult **MUST** be on hand to supervise the group at ALL times. A 10:1, participant to supervisor, ratio is **REQUIRED**.
- b) All equipment, materials and furniture must be returned to original location.
- c) In all cases, you are responsible for any breakage or loss. All building regulations and laws (i.e. no smoking, etc.) must be met.
- d) _____ A fee of \$40/hr must be paid to Medina Central School District to cover the time of cleaners/custodians in buildings (includes opening/closing of building).
- e) _____ A fee of \$15/hr must be paid to Medina Central School District for use of kitchen facilities to cover the time for kitchen supervision,
- f) _____ A qualified person must be able to operate _____.
- g) _____ You must furnish your own equipment.
- h) _____ VET'S PARK fee of \$100/single game or \$150/double header must be paid in advance to cover cost of lighting (if required) for night games. The school will not guarantee any lights if payment is not received in advance.
- i) _____ \$10/hr fee for AV (will be billed by Medina High School A-V Club)
- j) _____ Other _____

2) _____ Your request has been denied for the following reason(s)

- a) _____ 14 days' notice not provided
- b) _____ Space requested no available
- c) _____ Other _____

SECTION C (POOL USAGE)

1) Number of adults _____ children _____ \$13/hr must be paid per lifeguard, \$28/hr must be paid to cover the time for certified pool operator

2) _____ Touch pads _____ Sound system requested _____ Lifeguard assigned _____ Certified Pool Operator assigned
(**ONLY** needed if pool is used)

POOL SUPERVISOR'S SIGNATURE _____ Date _____

SECTION D

- 1) Before approval, non-school groups **MUST** submit a current certificate of insurance with **EVERY** facility request form. The certificate of insurance must list Medina Central School District as "Additional Insured" for general liability coverage; Proof of Workers' Compensation; and a 30-day cancellation notice.
- 2) Failure to follow these regulations will result in loss of building privileges.
- 3) Medina Central School District reserves the right to cancel ALL activities in case of emergencies, snow days, etc.

Athletic Director's Signature _____ Date _____

Principal's Signature _____ Date _____

Superintendent's Signature _____ Date _____

WHITE: BUSINESS OFFICE GREEN: ATHLETIC DIRECTOR CANARY: PRINCIPAL PINK: DIRECTOR OF MAINTENANCE GOLDENROD: REQUESTER