

Administrative Procedure 940 – Form 940-1

FORM 940-1 AGREEMENT FOR PUBLIC USE OF SCHOOL FACILITIES

*Form must be completed in its entirety to be considered valid.

		Date:				
Name of School Requested			Room No.			
Contact Person for School			Phone & Fax			
Name of Renter (Applicant)			Organization			
Address of Renter				•		
Phone & Fax			Email			
Expected Attendance				•		
Type of Rental	II. Pr III. Pr IV. Jo	II. Private III. Public Meeting IV. Joint Use Additional Hours			Specific Detail of Event:	
# of Days of Event		From (date)		To (date)		
Hours of Event		From		Until		
Will Alcohol be Served:		If yes, will it b	oe free of charge?			
If yes, what controls are in place to limit consumptions?	Specia effecti		icense must be prov	ided <u>prior</u> to	insurance being	
Renter Signature				Date		
Print Name						
School Board or Designate Signature				Date		
Print Name						

Renter must fully complete this 2 page application and initial where indicated.





Rental Rate (if						
applicable)						
Rental Amount		To be Paid by				
Accepted on behalf of the community user group. I/We agree to pay the applicable rental rate, abide by the						
rules and provide a Certificate of Insurance where required with Northern Gateway Public Schools as "Named						
Insured".						
I/We hereby agree to accept the allotment as above and abide by the attached regulations.						
Signature:						
Approved on behalf of Nort	hern Gateway Public					
Schools	-					
Signature:		Print:				

____Initials of Renter

