**Wheatland Union High School District**

# REQUEST FOR USE OF FACILITIES

1. _____ _____ _____
*Organization Making Request* *Date of Use* *Time(s) of Use*

_____ Nonprofit? Yes No
*Mailing Address* *Circle One*

2. Facilities Requested **Wheatland Union High School**
*Specify School*

Ball Field/Playground _____ Library_____

Gymnasium _____ Other _____

Multi-Use Room _____ _____

Kitchen/Serving Room _____ _____

3. How will facilities be used? _____

Is attendance restricted? _____ If yes, explain _____

Admission charged? _____ If yes, how much _____

Number in attendance _____

Rental/Deposit _____ *(must be paid in advance)*

Special Arrangements _____

_____

4. STAEMENT OF APPLICANT: The undersigned applicant is an authorized official of the group submitting this application. The applicant has read the District's rules and regulations.

It shall be distinctly understood, and agreed, that subject applicant and related organization making this application assume ***ALL RISK FOR LOSS, DAMANGE, LIABILITY, COST OR EXPENSE*** that may arise during or be caused in any way by such use or occupancy of the facility.

The applicant further agrees that in consideration of being permitted to use said facilities, the applicant and or organization will save and hold said School District and their agents and employees free and harmless from any loss, claim, liability, damages and or injuries to persons and property that in any way may be caused by the applicant's use or occupancy of said facilities.

***I declare under penalty of perjury that the foregoing statement is true and correct.***

Applicant Name: _____ Applicant Signature: _____

Applicant Title: _____ Today's Date: _____ Phone: _____

Liability Insurance Carrier and Policy Number _____

Additional insured endorsement attached? Yes_____ No _____

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***Routing:*** *****For District Use Only***

***Cc:*** ***Receipt Number***_____ ***Amount*** _____