



SPRECKELS UNION SCHOOL DISTRICT

130 Railroad Avenue, P.O Box 7362 Spreckels, CA 93962

Phone: (831) 455-2550 * Fax: (831) 455-9816

APPLICATION TO USE PUBLIC SCHOOL FACILITIES

(Please type or press firmly)

1. Facilities requested: _____ School Site: _____ Room(s): _____
 2. Dates of requested use: One Time (Month/day/year) _____
(Attach additional sheet if necessary) Ongoing 1) (List each date) _____
or 2) Start date: _____ End date: _____
Day(s) of the week: (circle one) Every ____ st/rd M T W Th F S Sun
 3. Time facility needed (Bldg. opened 1/2 hour before time requested): From: _____ a.m./p.m. To: _____ a.m./p.m.
 4. Personnel/equipment requested: _____
 5. Type of program or use: _____ Nonprofit youth program
(See attached listing) _____ Nonprofit community program
_____ For profit program
- Note:** Designation of category and assignment of fees is subject to the Superintendent's discretion.
6. The undersigned certifies that he/she:
 - a. Will be responsible, on behalf of the organization, for any damage or unnecessary abuse of school facilities due to the occupancy of said premises by the organization. The organization agrees to abide by and enforce the rules and regulations of the district governing the use of buildings, ground and equipment.
 - b. Understands that signing this application does not constitute approval for use of facilities until it has been approved by the school district and an approved copy has been returned to the applicant.
 - c. Understands that a current Certificate of Insurance listing Spreckels Union School District as an additionally insured and showing minimum coverage of \$1,000,000/occurrence and \$2,000,000/general aggregate must be supplied before the request is approved. **EXP:** _____
 7. I have read the regulations and stipulations on this form and agree to abide by them. I understand that failure to abide by the regulations may result in cancellation of the agreement.

Name of applicant (please print)

Group/Organization

Mailing Address, City, Zip

E-mail address

Signature of applicant

Date of application

Telephone number

Principal/Site approval

District approval

Custodian (per hour): _____ Other fees (per hour): _____ Rental fee (per hour): _____

White: District

Yellow: Applicant