

**APPLICATION FOR THE USE OF SCHOOL FACILITIES**  
**(Reverse Side)**

PLEASE NOTE THE FOLLOWING ITEMS:

1. Permission to use facilities of The City School District is granted in accordance with and subject to the policies of the Board of Education and the administrative regulations governing such use. All permit applicants are expected to respect the Values Policy of the District, and must agree that to the full extent required of the applicant organization by law, it shall not discriminate against any person on any Constitutionally impermissible basis.
  
2. Only facilities specifically asked for in the application are to be used. No activity shall occur on any day for which the Superintendent has closed schools for weather or other reasons; or if an official state of emergency has been declared. It is agreed that the District, and its officers and employees shall not be liable for any claim or loss of any kind resulting from such cancellation.
  
3. Payment for all damage to building or equipment is to be assumed by occupant. Insurance certificate and agreement to defend and indemnify the District and its employees is required.
  
4. No equipment is to be brought into the building or on the school grounds and connected with the electric service without a special permit from the Director of Educational Facilities. Application for such permit is to be filed five (5) working days before proposed use.
  
5. No scenery, decorations, combustible materials, animals, or other things of an unusual nature may be brought into a school building without approval and, if necessary, the presence of an inspector to insure their proper use.
  
6. Smoking or drug use by those in attendance; or the use of open flames, such as candles, is not permitted. No alcoholic beverages may be served. Violations of this rule may place the applicant on an ineligible list.
  
7. Games or other athletic events may not be conducted and swimming pools may not be used unless the leadership has been approved by the Health and Physical Education Department of the City School District.
  
8. The Principal, the Custodian-Engineer or the approved assistant of either shall be in charge of the building whenever it is open for one or more persons.
  
9. The applicant agrees to comply with District regulations requiring written parental consent for participation by people under 18. Under no circumstances shall any activity involving persons under 18 be permitted unless there is a minimum of two adults present to supervise. Under no circumstances shall a permit holder allow any adult supervisor to be alone on District property with a minor.

CITY SCHOOL DISTRICT 131 West Broad Street Rochester, New York 14614 Attn: Permit Officer (585) 262-8747	<b>APPLICATION FOR THE USE OF SCHOOL FACILITIES (Front)</b>	Do Not Write Here Permit No. _____ _____
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**TO BE FILED AT CENTRAL ADMINISTRATIVE OFFICES**

**APPLICANT** 1. Application must be filed ten (10) working days in advance of contemplated use.

**PLEASE NOTE** 2. Please be sure to read the reverse side of this form. Permit subject to District Community Use rules.

**APPLICANT TO ANSWER ALL QUESTIONS AND TO INITIAL WHERE APPLICABLE**

1. Do you agree to abide by the items on the reverse side of this form? Yes \_\_\_\_\_ No \_\_\_\_\_ (Initial here \_\_\_\_\_)
2. Applicant organization agrees to defend and indemnify the District and its officers and employees and to provide liability insurance as required by District regulations. (Initial here \_\_\_\_\_)
3. I agree to require the use of only the facilities, services and staff checked below within the hours and for the purpose stated. (Initial here \_\_\_\_\_)
4. I am prepared to meet the charge (if any) within the time prescribed. (Initial here \_\_\_\_\_)
5. Do you propose to charge for admission? \_\_\_\_\_ If so, how much? \_\_\_\_\_ For what will the proceeds be used? \_\_\_\_\_
6. Will you restrict admission? \_\_\_\_\_ If so, describe \_\_\_\_\_
7. Estimated number in attendance \_\_\_\_\_
8. Name of responsible person in attendance (please print): \_\_\_\_\_
9. \_\_\_\_\_  

Name of Organization	Official Address of Organization	Phone No.
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10. Is this a not-for-profit organization? \_\_\_\_\_ Tax-exempt number \_\_\_\_\_
11. Does the organization propose to provide services to RCSD students? \_\_\_\_\_ Has the applicant completed an "Application for Delivering Services in the Rochester City School District"? \_\_\_\_\_
12. Does the majority of membership in the organization reside within the City of Rochester? \_\_\_\_\_
13. \_\_\_\_\_  

Signature of Applicant	Address of Applicant	Phone No.	Date
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**We hereby apply for school facilities as follows:**

\_\_\_\_\_ School, on \_\_\_\_\_ (Day), \_\_\_\_\_ (Date)  
 From \_\_\_\_\_ AM/PM to \_\_\_\_\_ AM/PM with facilities, staff and service as checked.  
 For the purpose of holding \_\_\_\_\_ (please attach a separate sheet which gives a detailed description of the event)  
 Name of speaker(s) if any \_\_\_\_\_

Facility	Check	Staff	Check	Service	Check
Auditorium	_____	Custodian	_____	Heat	_____
No. of seats	_____	Asst. Custodian	_____	Ventilation	_____
Cafeteria	_____	Custodial Asst.	_____	Hot Water	_____
Classroom	_____	Locker Room Attendant	_____	Light	_____
Room No.	_____	Boy's	_____	Power	_____
Boys' Gym	_____	Girl's	_____	Inspection	_____
Boys' Gym-Bleachers	_____	Cleaners	_____	Cleaning	_____
Boys' Locker Room	_____	Groundsperson	_____	Seating - Chairs	_____
Boys' Showers	_____	Stage Manager	_____	Seating - Bleachers	_____
Girls' Gym	_____	Stage Crew	_____	Stage Lighting	_____
Girls' Locker Room	_____	Sentry/Security Person	_____	P.A. System	_____
Girls' Showers	_____	Special	_____	VCR/Overhead Projector	_____
Swimming Pool	_____			Piano	_____
Athletic Field	_____			Special	_____
School Grounds	_____				
Multi-Purpose Room	_____				
Special	_____				

	APPROVALS		
	Signature	Date	
Principal (For date, facilities, and occupancy)	_____	_____	Free Use _____ Not Free Use _____
Principal - Will this function involve additional personnel? (This information will be used for billing purposes. Use additional sheet if sheet if necessary.)	_____ Title? _____	_____ # of Hours _____	
Health and Physical Education (For recreational leadership)	_____	_____	
Facilities (Checked for all signatures, policy compliance, insurance certificates, and fee payment)	_____	_____	