

LAKELAND CENTRAL SCHOOL DISTRICT
 USE OF SCHOOL FACILITIES POLICY AND APPLICATION
 (APPLICANT: Retain this policy declaration for your information)

The use of all District facilities shall be subject to the approval and rules of the Board of education administered by the Business Office.

1. Organizations wishing to use District facilities shall apply on the prescribed form to the school building where the desired room/facility is located.
2. A team roster or group list of students/residents, which includes address and home school, must be attached to the Application for Authorized Use of School Facilities, in order to be considered for approval.
3. Lakeland students/residents must comprise a minimum of 75% of participants in order to be approved.
4. In the event of inclement weather, the District has the final authority on whether facilities are usable.
5. Intoxicants and illegal substances shall not be brought onto District facilities at any time.
6. All posted rules must be adhered to.
7. Profanity, objectionable language, disorderly acts or illegal activities of any kind are absolutely prohibited and those violating this prohibition will be ejected from the property and prohibited from future use.
8. Any damage to District facilities shall be promptly repaired by the District at the user's sole expense. No exceptions will be made.
9. If maintenance personnel are not available, the organization must provide a designated individual to block the entry and leaving from doors. **DOORS MAY NOT BE LEFT OPEN.** The organization must provide the individual's name to the District prior to the use. In addition, the organization must ensure that all doors are locked and lights are turned off when leaving. Any organization that fails to follow these rules will be ejected from the property and prohibited from future use.
10. Organizations using the facilities must clean up afterwards.
11. Permits may be revoked at any time.
12. Any organization with youth under 18 years old requires the presence of adequate adult supervision at all times.
13. Smoking or other use of tobacco products is not allowed on District property, including in vehicles on District property.
14. Facilities are not available if in conflict with school use. No unauthorized vehicles are allowed on school property. No field or building alterations (lining of fields or gymnasiums, erecting permanent goal posts or structures, etc.) are allowed without prior approval.
15. The District does not discriminate on the basis of race, color, creed, national origin, disability, marital status, veteran status, sexual orientation, sex or any other discriminatory classification in its educational programs, other programs or employment services.
16. All users must provide the following insurance prior to using facilities:
FAILURE TO DO SO PRIOR TO USE WILL RESULT IN THE REVOCATION OF YOUR PERMIT
 - A. The user hereby agrees to effectuate the naming of the District as an unrestricted additional insured on the user's policy.
 - B. The policy naming the District as an additional insured shall:
 - Be an insurance policy from an A.M. Best rated "secured" New York State licensed insurer;
 - Contain a 30-day notice of cancellation'
 - State that the organization's coverage shall be primary coverage for the District, its Board, employees and volunteers.
 - C. The user agrees to indemnify the District for any applicable deductibles.
 - D. Required minimum insurance: Commercial General Liability Insurance – \$1,000,000 per occurrence/\$2,000,000 aggregate
 - E. User acknowledges that failure to obtain such insurance on behalf of the District constitutes a material breach of contract and subjects it to liability for damages, indemnification and all other legal remedies available to the District. The user is to provide the District with a certificate of insurance, evidencing the above requirements have been met. The failure of the District to object to the contents of the certificate or the absence of same shall not be deemed a waiver of any and all rights held by the District.

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17. Prior to the start of the event, an announcement should be made to your group regarding emergency evacuation procedures. For example, pointing out posted procedures, directions for exiting, how to respond to a fire alarm, etc.
18. All provisions of the District Code of Conduct concerning Public Use of School District Property must be complied with at all times.

The Lakeland Central School District prohibits all weapons on school property and premises
This includes all forms of weapons. This must be enforced at all events.

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APPLICATION FOR AUTHORIZED USE OF SCHOOL FACILITIES

Applications must be submitted to the building principal at least 30 days in advance of the requested date of use. School related activities take precedence over other organizations' use of school buildings. The Board of Education reserves the right to reassign your scheduled activity in case of conflict.

NAME OF ORGANIZATION: _____ ORG. PHONE: _____
RESPONSIBLE PERSON: _____ HOME PHONE: _____
ADDRESS: _____ WORK PHONE: _____
CITY: _____ STATE: _____ ZIP: _____ CELL PHONE: _____

A. DATE(S) REQUESTED: _____
B. HOURS REQUESTED: _____

<p>C. <u>LOCATION REQUESTED</u></p> <p><input type="checkbox"/> Lakeland High School <input type="checkbox"/> Walter Panas High School <input type="checkbox"/> Alternative High School <input type="checkbox"/> Lakeland Copper Beech Middle School <input type="checkbox"/> Benjamin Franklin Elementary School <input type="checkbox"/> Thomas Jefferson Elementary School <input type="checkbox"/> Van Cortlandtville Elementary School <input type="checkbox"/> George Washington Elementary School <input type="checkbox"/> Lincoln-Titus Elementary School <input type="checkbox"/> Administration</p>	<p>D. <u>FACILITY REQUESTED</u></p> <p><input type="checkbox"/> Gymnasium <input type="checkbox"/> Kitchen <input type="checkbox"/> Classroom (specify) <input type="checkbox"/> Field (specify) <input type="checkbox"/> Other → Maximum # of swimmers per session - 70 <input type="checkbox"/> Pool → One (1) Lifeguard per thirty (30) swimmers → The pool may not be used during school Vacation periods, holidays and weekends. → Please read Pool Rules and Regulations Which are posted in the pool area.</p>
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E. WILL RELIGIOUS SERVICES/INSTRUCTION BE CONDUCTED? YES NO
IF YES, PLEASE EXPLAIN: _____

F. ESTIMATED ATTENDANCE: _____ LICENSED: _____ PROFIT: _____ NON-PROFIT: _____

G. WILL ADMISSION BE CHARGED? If yes, Amount for Adults: \$ _____ Children: \$ _____

PURPOSE FOR WHICH PROCEEDS WILL BE USED: _____

H. ADULT SUPERVISORS (Coaches, Lifeguards, Instructors, etc. Attach list, insurance or lifeguard certification if needed)
NAME: _____ PHONE: _____
ADDRESS: _____ CITY _____ STATE: _____ ZIP _____
:

I. DESCRIPTION OF PLANNED EVENT: _____

J. ROSTER ATTACHED? _____ 75% LAKELAND STUDENTS/RESIDENTS? _____

I, the undersigned responsible official, state that I am authorized to sign this application on behalf of the above organization and bind said organization to the statements, representations and agreements set forth in this application. I have read the attached policy, rules and regulations of the Lakeland Central School District pertaining to the "Use of School Facilities" which accompanied this application and do assume complete responsibility on behalf of the organization which I represent and both the organization and I fully accept the conditions as established therein.

Signature: _____ Date: _____

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NAME OF ORGANIZATION: _____ LOCATION/FACILITY REQUESTED: _____
DATE(S) REQUESTED: _____ TIMES: _____

All signatures and requirements must be complete before authorization of facilities use is granted.

DO NOT WRITE BELOW THIS LINE

I. AVAILABLE: _____ UNAVAILABLE: _____
Reason if not AVAILABLE: _____
Building Administrator or designee: _____ *Date:* _____
(except fields)

II. FACILITY USAGE FEE APPLICABLE? YES NO
OTHER FEES APPLICABLE? YES NO
ROSTER ATTACHED? YES NO
75% LAKELAND STUDENTS/RESIDENTS? YES NO
LIFEGUARD CERTIFICATE: ATTACHED ON FILE
INSURANCE CERTIFICATE: ATTACHED ON FILE
Name of Insurance Company: _____
Amount of Liability: \$ _____ Expiration Date: _____
APPROVED: _____ DISAPPROVED: _____
REASON IF NOT APPROVED: _____
Superintendent, Buildings and Grounds or designee: _____
Date: _____
Building Principal: _____
Date: _____

PLEASE ROUTE
FOR APPROVAL: Building Principal (except fields) Superintendent of Buildings and Grounds