



# RIVER VALLEY SCHOOL DISTRICT

660 West Daley Street      ≈      Spring Green, Wisconsin 53588      ≈      Phone: 608-588-2551

830-Exhibit

## FACILITIES USE REQUEST FORM

**NOTE: Read "Facilities Use Regulations" on the back of this form before completing this form.**

\* Name of Individual/Group: \_\_\_\_\_

Name of Group Representative: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\* Facility Requested: \_\_\_\_\_

Date(s) of Usage: \_\_\_\_\_

Time of Usage (note a.m. or p.m.): \_\_\_\_\_

Purpose of Usage: \_\_\_\_\_

Equipment to Be Used or Rented: \_\_\_\_\_

\* Will an admission fee be charged?     YES     NO

\* Do you need keys/security code for gaining entrance to the building?     YES     NO

Will concessions and/or merchandise be sold?     YES     NO

Comments: \_\_\_\_\_

*I hereby agree that I understand the following:*

Liability Insurance - The school district does not provide insurance for this use. I/We must provide insurance to insure that I am/we are protected against liability.

Damage Reimbursement - I/We must reimburse the school for any damage to equipment, chairs, furniture, building, etc. The reimbursement shall be determined by the River Valley School Board. Depending on the extent of damages, there is the potential denial of future use.

Prohibition of Alcohol/Tobacco - Use of tobacco, alcohol, electronic smoking devices, or any controlled substance is prohibited in all school facilities, school vehicles, and all school premises.

Clean-Up - I/We must clean up the facilities used or I/we may be charged for clean-up. Clean-up includes checking restrooms for cleanliness or misuse, turning off lights and heat, and securing/locking building. Additionally, all materials brought into the building must be removed at the conclusion of use.

Fees - I/We must pay all fees prior to the use of the facility.

\_\_\_\_\_  
Signature of Individual or Group Representative

\_\_\_\_\_  
Date

### TO BE COMPLETED BY BUILDING PRINCIPAL/ADMINISTRATIVE BUILDING COORDINATOR:

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

\* Rental Fee: \$ \_\_\_\_\_

(All fees are to be paid prior to the use of the facility. See Fee Schedule on back.)

Comments: \_\_\_\_\_

Signature of Building Principal/Administrative Building Coordinator

Date

**Copies of this form to be sent by Building Principal/Administrative Building Coordinator to:**

1. Individual or Group Requesting Use of School Facilities
2. District Administrator
3. Athletic Director (if facility requested is an athletic facility)

CROSS REF: Policy #832 – Tobacco and Electronic Smoking Devices Possession and/or Use on School Premises  
Policy #835 - Alcoholic Beverage Possession and/or Use on School Premises

REVISED: March 12, 1998  
APPROVED: March 26, 1998  
REVISED: June 8, 2000  
APPROVED: July 13, 2000  
APPROVED: October 21, 2004  
REVISED: November 18, 2010  
APPROVED: December 9, 2010  
REVISED: December 8, 2016  
APPROVED: January 12, 2017  
REVISED: April 20, 2017  
APPROVED: May 11, 2017  
REVISED: May 10, 2018  
APPROVED: July 12, 2018