

PORT BYRON CENTRAL SCHOOL DISTRICT

BUILDING AND FACILITIES USE REQUEST

- ❖ *School functions will take precedence over all activities by non-school groups.*
- ❖ *Facilities should not be requested more than sixty days in advance of date to be used.*

CONDITIONS AND RULES:

The use of facilities will be refused to any group that abuses the privilege through:

1. Destruction of property
2. Violation of building rules
3. Illegal or immoral use
4. Use of tobacco, alcohol, or drugs on school property.
5. Failure to involve both sides in a controversial issue
6. Failure to make restitution for damage done
7. Failure to confine activities to the area requested
8. Failure to report damage or failure of equipment to school officials the following day.
9. Failure to leave the building as found. This will usually require sweeping the area used.
10. Activities involving food will be permitted in the cafeteria only.
11. Dances will be permitted in the gymnasium only
12. Adult groups using the facilities for adult purposes must not permit children in the building.
13. Failure to submit proof of insurance.

OTHER:

- The person representing the organization will also be responsible for reporting any injuries, damages to equipment or property, and for ensuring safe parking.
- Our custodial staff will admit all groups whose activity has been approved.
- Keys will not be issued to any group using the facilities.
- Any group, school or non-school, using the cafeteria kitchens must employ at least one of the regular staff at that person's rate of pay plus benefits.
- Activity may require a rental fee. Any charges made are to help defray the overhead of building expenses and custodial help.

Name of Organization: _____

Representative's Name: _____

Address: _____ **Phone No.** _____

Date(s): _____ **Time:** _____

Area to Be Used: _____

Purpose: _____

PORT BYRON CENTRAL SCHOOL DISTRICT

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FEES:

Rental and Other: _____

Custodial: _____

Cafeteria Staff: _____

Total: _____

Signed: _____

Business Administrator

As a representative of the above organization, I understand and agree to the above rules.

Applicant Signature: _____

Print Name: _____

Approved by: _____

Building Principal or Administrator

**BUILDING AND FACILITIES USE REQUEST
PROOF OF INSURANCE**

Effective July 1, 2003, all outside groups using the Port Byron Central School facilities will be required to supply proof of insurance or they will not be allowed to use the facilities.

Please forward proof of insurance to the Port Byron Central School:

**District Office
30 Maple Avenue
Port Byron, NY 13140.**

If you have any questions please feel free to call me at (315) 776-5728, ext. 1327.

Sincerely,

Mitchell Toleson
Assistant Superintendent for Business and Finance

Copies: Applicant, Building Principal, District Office, Maintenance Supervisor

Revised: 03/15