

**ABERDEEN SCHOOL DISTRICT
P.O. Box 607 | Aberdeen, MS 39730**

USE OF BUILDING FORM

ORGANIZATION: _____

ACTIVITY: _____

PLACE: _____

DATE: _____

TIME: _____

INSURANCE COMPANY: _____
(ATTACH COPY OF LIABILITY POLICY)

SECURITY COMPANY: _____
(BONDED & LICENSE) License # Copy of License

PERSON RESPONSIBLE: _____

COST: \$400.00 per day Aberdeen Elementary School, Belle Elementary School,
Shivers Middle School, Aberdeen High School
\$150.00 security deposit is required for all facility rentals; once the event is over and the
facilities are inspected, the deposit will be returned with no damage.

Lessee must submit an insurance policy in the amount of \$1,000,000 for liability. Must provide Aberdeen School with Certificate of Liability Insurance indicating the Insurance Carrier, policy number, and the effective date of policy as well as the requested limits. The District must be named an Additional Insured on the Lessee's General Liability policy and this Certificate must indicate a Waiver of Subrogation in favor of Aberdeen School District. A copy of the requested COI must be attached and must be completed and signed by a licensed Insurance Agent and received prior to the use of any District property.

(Cost does not include custodian's salary and benefits nor security. Custodians will be responsible for opening and securing the building **ONLY**. You **MUST** clean up the building after event.)

MAKE CHECK OR MONEY ORDER PAYABLE TO: ABERDEEN SCHOOL DISTRICT

Signature of Person Responsible

Mailing Address

Email address

Telephone Number

DISTRICT USE ONLY

PRINCIPAL'S APPROVAL _____

SUPERINTENDENT'S APPROVAL _____

DATE OF APPROVAL _____