

# Facility Use Form

Harrisburg School District #7

Code: KG-AR(2)  
Adopted: 4/12/10

## Where

1. Room/Area Requested: \_\_\_\_\_ School Requested: \_\_\_\_\_  
Equipment only Requested: ☐
2. Equipment/items needed: ☐ Tables ☐ Chairs ☐ Access to showers/dressing rooms ☐ Other: \_\_\_\_\_
3. Additional Instructions/needs: \_\_\_\_\_

Note: Tennis shoes must be worn in gym areas

## Who

4. Name of Organization Requesting Use: \_\_\_\_\_
5. Charges, if any, will be paid by: \_\_\_\_\_
6. The event will be supervised by: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_
7. Describe Activity fully: \_\_\_\_\_
8. Names of those who will be attending: \_\_\_\_\_

## When

9. Date(s) of event (list beginning/ending date(s) if event is repeated on several dates): From \_\_\_\_\_ to \_\_\_\_\_  
a. Event is a: ☐ One time event ☐ Weekly ☐ Every other week ☐ Monthly ☐ Every other month ☐ Other: \_\_\_\_\_  
b. Day(s): ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday
10. Time(s): From \_\_\_\_\_ AM PM (circle one) to \_\_\_\_\_ AM PM (circle one)

I certify that I am the authorized representative of the requesting organization and that the statements contained herein are true to the best of my knowledge. I agree to be responsible for the safe keeping of the facilities used for the named activity and for payment of all charges. I further agree that the school property will be used in accordance with the policy adopted by the Harrisburg School District #7 Board of Directors and the resulting administrative guidelines. Copies of the guidelines may be obtained from the District Office during normal working hours (phone 541-995-6626 option 1) or from the district website at [www.harrisburg.k12.or.us](http://www.harrisburg.k12.or.us). I personally, and on behalf of the requesting organization, agree that I and the organization shall indemnify, defend, and hold Harrisburg School District #7 harmless, its officers, agents, and employees from any claims, actions, liability or costs, including attorney fees and other costs of defense, arising out of or in any way related to the use and occupancy allowed under this agreement and arising from the sole or joint negligence of the Lessee, its members, officers, agents, spectators, or invitees. The Lessee shall be responsible for any loss, damage, or destruction of its own property, equipment, and materials used in conjunction with its activities. In addition, Lessee shall be responsible for any loss, damage or destruction of property belonging to Harrisburg School District #7 or a third party, caused by the sole or joint negligence of the Lessee. Any exception or waiver of these requirements shall be subject to review and approval by Harrisburg School District #7's Superintendent. All users of Harrisburg School District #7 property shall comply with all federal, state, and municipal equal opportunity laws and regulations prohibiting discrimination.

Signature

Print Name

Date Submitted

Address: (Street, City, Zip)

Home Phone

Office Phone

**The right is reserved to cancel this permit at any time.**

**When the facility is not to be used on the date requested, the school office is to be notified at least one day prior to that date.**

Date Received: \_\_\_\_\_

## FOR DISTRICT USE ONLY

### Access/Requirements:

- ☐ Doors will be opened and secured by \_\_\_\_\_
- ☐ Key dispensed ☐ \$25 deposit
- ☐ Alarm code necessary
- ☐ Insurance Required (documentation necessary)

### Personnel Required:

- ☐ Kitchen staff (required if renting kitchen)
- ☐ Equipment Operator
- ☐ Athletic Director
- ☐ Coach
- ☐ Other: \_\_\_\_\_

\_\_\_\_\_ at \$ \_\_\_\_\_  
\_\_\_\_\_ at \$ \_\_\_\_\_  
\_\_\_\_\_ at \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

No Charges, explain: \_\_\_\_\_

Payments should be sent to:

Harrisburg SD #7  
PO Box 208  
Harrisburg OR 97446  
ATTN: Business Manager

## SCHOOL APPROVAL:

\_\_\_\_\_  
Principal or Superintendent (Required)

**FOR EMERGENCIES CALL TERRY THORN AT 541-729-1802**