

**APPLICATION FOR USE OF SCHOOL FACILITIES  
LINDEN COMMUNITY SCHOOLS  
FACILITY USE CONTRACT**

Please complete and return this contract to the Linden Community Education Department 10 days prior to scheduled event. You will be issued a permit when your application is approved. Please have this permit with you at all times you are in your assigned rental space.

Name of Organization or Group: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Supervisor/Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Event: \_\_\_\_\_

Building and Room: \_\_\_\_\_

Approximate number of participants: \_\_\_\_\_ Food and/or beverage served: \_\_\_\_\_

(If your group has more than 25 participants, we encourage at least two adult supervisors.)

Special Equipment requested: \_\_\_\_\_

List date(s) of use: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

By signing this Facility Use Contract you understand that by reserving any district facility you and/or your group is responsible for any damage that may be caused during your time in the facility. You and/or your group may also be obligated to pay for any custodial or facility charges if applicable. In addition, the User(s) undertakes and agrees to indemnify and hold harmless the school, school board, school board elected and appointed officials, administrators, principals, teachers and all other school employees, volunteers or representatives, and all persons and bodies corporate acting for or on behalf of them, against all liability, claims, demands, actions, suits damages, proceedings, cost and expenses (including reasonable attorney fees) whatsoever (including injury to persons and damage to property) for which they may be or become liable directly or indirectly arising out of the use of Linden School District premises by the User(s) relating to the use of the Linden School District premises or for such amounts as may not be payable under any such insurance policy.

**I have received and read a copy of the Facility Use Rules and Regulations and fully understand and will adhere to them. I also have been informed of the availability and location of a AED (Automated External Defibrillator) in each school building:**

**Responsible Party Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Building Administrator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For office use only:**

Rcvd. By: \_\_\_\_\_ DynaCal: \_\_\_\_\_ Permit Issued: \_\_\_\_\_ Secretary copy sent: \_\_\_\_\_