

**GYMNASIUM USE APPLICATION AND AGREEMENT
CHECKLIST**

Note: This is for the issuance of an individual key. Any use other than individual or employee supervised activities require a Facility Use Form. Certain individuals are approved to open the gym for community games as long as they are supervised by the approved individual.

Mandatory Items

- Gymnasium Use Application and Agreement (filled out, signed and notarized by School District)
- Waiver and Release of Liability (filled out, signed and notarized by School District)
- Raptor Background Check (volunteer form)
- Copy of Driver's License

Normal key hours access the Buff Gym South West door Monday – Friday 6:30pm – 6:30am & all day Saturday and Sunday until 6:30am on Monday. Hour exceptions are approved on a case by case basis by the Superintendent and noted on this form.

Annual renewal of keys required – annual renewal info will be emailed to current key holders. If you have issues or cannot get in call Superintendent at 307-710-5116 or HS Principal at 307-629-1553.

Return Completed Application to GHS Principal. Initial Approvals Must Meet in Person (Review expectations) with Principal and Superintendent.

Recommend Approved / Recommend Disapproved (circle one)

Principal Signature **Date**

Disapproval Reason(s): _____

Approved / Disapproved (circle one)

Superintendent Signature **Date**

Disapproval Reason(s): _____

Approved Exceptions: _____

Key Issue Date: _____

Key Signed For: _____
Printed Name **Signature**

**GYMNASIUM USE APPLICATION AND AGREEMENT
Individual (other uses require a facilities use form)**

NAME(s): _____ **EMAIL:** _____

ACCESS PROCEDURES FOR DISTRICT GYMNASIUMS.

1. An Individual must initially request access to the District’s gymnasiums by contacting the High School Principal. A meeting will be arranged to include paperwork – initial authorization requires approval and face to face meetings with GHS Principal and District Superintendent.
2. All activities within the District’s gymnasiums must be under the direct supervision of an adult at all times. (adult is a responsible individual 21 years or older)
3. An individual making a request for access to the District’s gymnasiums must have a signed Waiver and Release of Liability document on file with the Activity Director’s office. Additionally, any individual who will be under the direct supervision of the person requesting access to the District’s Gymnasiums must have a signed Waiver and Release of Liability document on file with the Activity Director’s office.
4. A key to the District’s gymnasiums is issued solely to the individual listed as the “Person in Charge” on the Facilities Use Form. At NO time is this key to be given out to any other individual FOR ANY REASON. Violation of this condition will result in the revocation of the key. Electronic locks AND VIDEO SURVEILLANCE are used to monitor access to the District’s gymnasiums. Keys will work from 6:30pm to 6:30am and all day on Saturday and Sunday. Other times approved per individual on a case by case basis by the Superintendent. Report a lost or stolen key immediately to the GHS Principal.

GYMNASIUM GUIDELINES

1. Your use of the gymnasium and its equipment is strictly voluntary.
2. You assume all risks of physical injury and loss of possessions incurred during your use of the facility.
3. Abusive or foul language will not be tolerated.
4. Smoking, tobacco products, and alcoholic beverages are prohibited.
5. All food and drinks are to be kept in designated areas.
6. Appropriate shoes must be worn. Sandals are not considered appropriate footwear.
7. Shoes that mark the floor in the gyms are NOT ALLOWED.
8. Any sports equipment brought into the gymnasium must be clean.
9. Equipment that could be damaging to the gymnasium is not allowed.
10. Bicycles are not allowed in the gymnasium.
11. Animals are not allowed in the gymnasium.
12. No spitting on the floor, in the drinking fountains, or in trash cans is allowed.
13. Weight room use guidelines:
 - **Use of spotters is required when lifting with heavy weights.**
 - Belts are recommended with exercises involving the lumbar spine.
 - Clothing with belts, zippers, or other sharp metal is not to be worn when using seats/benches.
 - Check collars and tighten before using.
 - Check clearance to others and equipment.
 - Towels are recommended for use as covers on seats and benches.
 - Weights must be placed on weight racks when not being used.

INDEMNIFICATION

The User agrees to indemnify, defend and hold harmless Big Horn County School District #3 (the District), its agents, servants, employees, trustees, officers and representatives from any liability, loss, or damage which the District may suffer as a result of any claims, demands, costs, actions, causes of actions, or judgments, including attorneys' fees, asserted against or incurred by the District arising out of, during, or as a result of User using the District’s facilities, INCLUDING BUT NOT LIMITED TO CLAIMS OF NEGLIGENCE AGAINST THE DISTRICT.

SIGNATURE

Your signature below indicates that you have read and understood this agreement and agree to abide by its contents.

_____ Date: _____
User (Print and Sign)

**State of Wyoming
County of Big Horn**

The foregoing instrument was acknowledged before me by _____,

on the _____ Day of _____, 20_____.

Big Horn County School District #3

Greybull, Wyoming

**WAIVER AND RELEASE OF LIABILITY
Use of District's Gymnasiums**

In consideration of the school district allowing

(Names) _____

to participate in the following activity: Use of District's Gymnasiums, I hereby forever waive and release any and all claims of any kind whatsoever, **INCLUDING BUT NOT LIMITED TO CLAIMS OF NEGLIGENCE**, against Big Horn County School District Number Three (the School District), its officers, employees, agents, board members and representatives, arising out of my or my child's participation in the above activity. **THIS WAIVER AND RELEASE INCLUDES, BUT IS NOT LIMITED TO CLAIMS OF NEGLIGENCE AGAINST THE SCHOOL DISTRICT.** By signing below, I hereby waive and release any and all claims arising out of any kind of harm which may occur to me or to my child during the above described activity, including but not limited to claims involving personal injury or death.

I understand that participation in this event is strictly voluntary, and I freely choose to participate or to allow my child to participate.

I understand that Big Horn County School District does not provide medical coverage for me or for my child. I verify that I will be responsible for any medical costs that I incur as a result of my or my child's participation.

I am aware of the risks of participation, including but not limited to severe injury and/or death.

Signature

Date

State of Wyoming
County of Big Horn

The foregoing instrument was acknowledged before me by _____,
on the _____ Day of _____, 20_____.

SEAL



**Volunteer Agreement & Consent for Background Check
Big Horn County School District #3**

A volunteer shall not be in a one-on-one situation with a child during or outside of a school day unless the volunteer assignment requires (e.g., mentor program). Volunteers should not be with a student/s unless in the presence of a classroom teacher, administrator, or appropriate school personnel. If one-to-one meetings are necessary, volunteers should do so in an area designated or assigned by the building administrator.

Volunteers must provide identification and sign in/out at the school’s main office. Volunteers shall wear the “Visitors” badge or other means of identification, as required by school policy.

Respecting one’s privacy and confidentiality is very important: Each student with whom you work has the right to expect that nothing that happens to or about him or her will be repeated to anyone other than authorized school department employees, as designated by the administrators at your school.

Volunteer Application: Personal Information

IMPORTANT: Please enter all information exactly as it appears on your identification card (e.g. driver's license). Any field with an * is a required field.

First Name* <input style="width: 90%;" type="text"/>	Address Line 1* <input style="width: 90%;" type="text"/>
Middle Name <input style="width: 90%;" type="text"/>	Address Line 2 <input style="width: 90%;" type="text"/>
Last Name* <input style="width: 90%;" type="text"/>	City* <input style="width: 90%;" type="text"/>
Maiden Name <input style="width: 90%;" type="text"/>	State* WY ▼
Gender* ▼	Zip* <input style="width: 90%;" type="text" value="-"/>
Date Of Birth* <input style="width: 90%;" type="text" value="MM/DD/YYYY"/>	Phone Number* <input style="width: 90%;" type="text"/>
Soc. Security Number* <input style="width: 90%;" type="text"/>	Email* <input style="width: 90%;" type="text"/>

Volunteer Liability and Indemnification A volunteer shall at all times indemnify and hold harmless Big Horn County School District #3 and its officers, agents and employees from any and all claims, damages and expenses arising out of injuries to persons or damage to property which resulted from any omissions or negligent acts of the volunteer. I understand the expectations outlined above; including the requirements of a BCI check and confidentiality, and agree to abide by the guidelines set forth.

Applicant Signature: _____ Date: _____

Processed By: _____ Date: _____

Approved Disapproved (Circle One) Date: _____

SCHOOL VOLUNTEERS

The Board of Trustees recognizes the need to develop a volunteer program to support district instructional programs and extracurricular activities. The purpose of the volunteer program will be to:

- * Assist employees in providing more individualization and enrichment of instruction.
- * Build an understanding of school programs among interested citizens, thus stimulating widespread involvement in a total educational process.
- * Strengthen school/community relations through positive participation.

A volunteer is a person who works on an occasional or regular basis at school sites or other educational facilities to support the efforts of professional personnel. Such an adult volunteer worker will serve in that capacity without compensation or employees benefits of any type.

Use of volunteers within the district is not to conflict with or replace any regularly authorized personnel allotment.

Volunteers will work with students under the immediate supervision and direction of a certificated person.

Volunteers are expected to comply with all rules and regulations set forth by the district, including those rules and regulations related to confidentiality and background checks.

Adopted: 1/11/11

Additionally:

Volunteer coaches must complete the concussion protocol training.