

APPLICATION FOR COMMUNITY USE OF SCHOOL FACILITIES AND GROUNDS

This application is subject to the policy adopted by the Crawford Central School Board of Education and approval of the Administration. All items must be completed before approval is considered. Any questions, please contact Building, Grounds & Transportation Department (814) 724-3156.

Name of Event: Description of Event:		*		
Dates:		11mes:		
1. Group/Organization:				
2. Representative(s)				
Representative's Address				
Phone	E-N	1ail		
Name	Phone E-Mail			1ail
Name	_Phone		E-N	1ail
3. Certificate of Liability Insurance on File	e with CCSD?	Yes	☐ No	
4. Will there be admission charged or coll	lection taken?	Yes	No	
5. Group Classification (See back of form)	Class I	Clas	s II	Class III Class IV
6. Number of people projected to attend				
7. Which facility are you requesting?	e uniformed secu	irity guar	d for every	500 people in attendance)
MASH/MAMS East End First District West End Second District Neason Hill	Cochi	ranton Hig ranton Eler /Duratz		☐ I.S.C. ☐ Other
8. Area of facility: Auditorium (if checked see page 3) Athletic Field/Court/Track Auxiliary Gym Classroom(s) How many? Cafeteria Cafeteria	Commons Computer Lab Conference Ro Gymnasium Media Center			11. Special Equipment or Services Yes No See page 3 for special equipment and tech support.
There is NO PARKING in or around SCH	OOL FIRE LAN	JFS in the	Administr	ation Parking or on the grass
Vehicles will be ticketed or possibly towed a	way.		Administr	ation Farking of on the grass.
Representative Signature	Deta	_		
Official Use Only	Date			
		Se	ecurity Depo	osit \$
Building Principal	Date		Rental	Fee \$
		S	pecial Servi	ces \$
Building, Grounds & Transportation Director	Date		Otl	her \$ Total \$
Athletic Director/MASH Stage Director	Date			Total \$

User Classifications

Class I	School sponsored activities - Music Programs, Athletic Programs,		
	Parent Teacher Organizations, Bo	ooster Clubs	
Class II	Booster Club Special Functions, F	PTO Special Fun	ctions
	No Rental	VEV.	
	Incurred Costs:		
	□Kitchen	1 \$	<u></u>
	□Custodian	\$	_
	□Security	\$	_
ANY/ALL FI	EES REQUIRE A SECURITY DEPOSI	IT OF \$50.0	O PAID PRIOR TO EVENT.
All Commu	unity Organizations Require Proof	of Liability	Insurance for Activities.
Class III	Community Organizations:		
	Meetings - Classroom Fee	\$	
	Group Activities Fee	\$	(Gym for basketball, volleyball etc.)
Class IV	Other Community Organizations Charg	ging Fees(ie:Page	ants, recitals, PIAA, College Classes, etc.)

User Fees

Class:	I	II	III		IV
Computer Labs / Media Centers	See page 3 for details.				
Auditorium: Meadville Senior High (1200 capacity)	No Fee	No Fee	N/A	\$350 per *session \$700 maximum p	
Gymnasium: Meadville Middle School Cochranton Jr-Sr High All Elementary Meadville Senior High Middle School - Commons Area	No Fee	No Fee Incurred Costs □Custodian □Security	\$15 per hour	\$125 per date \$200 per date \$100 per date \$200 per date \$100 per date	Practice/Rehearsals \$75 per date \$75 per date \$50 per date \$75 per date
Meadville Middle School Meadville Senior High Cochranton Jr-Sr High	No Fee	Incurred Costs □Custodian □Security	N/A	\$50 per date	
Classrooms: Elementary Schools Secondary Schools	No Fee	No Fee	\$15 per hour	\$15 per hour	
Kitchens:	Incurred Costs	Incurred Costs	Incurred Costs	Incurred Costs	
Barco/Duratz:	No Fee	No Fee	N/A	TBD	

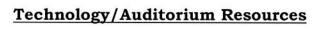
*Session times: 7:00 - 12:00

12:00 - 5:00 5:00 - 10:00

** There is NO PARKING:
In or Around SCHOOL FIRE LANES,
In The Administration Parking or
On The Grass.
Vehicles will be ticketed or possibly towed away.



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Technology Resources Needed:

□Presentation ONLY				
 Resources Needed – check all that apply 				
□Projection Device				
□Internet Access				
□AUP must be signed by the presenter				
□External Speakers				
□Other – Please specify: • Cost Per Day: • \$50.00				
Presenter and Participant Computers Needed Media Center or Computer Lab				
 Number of attendees: Resources Needed – check all that apply 				
□Projection device				
□Internet Access				
□AUP must be signed				
Applications:				
☐ Specify applications that you wish to use:				
(Office Suite and Internet Explorer are installed on all CCSD Windows-based computers.) • Cost Per Day: • \$75 – three hours or less • \$150 – more than three hours				
 Important Information: Web sites are filtered through SonicWall – some sites may be blocked due to content. Only CCSD computers are to be connected to the District's network. No personal devices of any kind are to be connected to the District's network. Personal flash drives are NOT to be used. If headsets are needed, participants should furnish their own. Contact the CCSD Technology Office at 724-3179 should you have questions. 				
Auditorium Resources Needed:				
□Projection Screen □Lighting (advanced lighting requires a stage crew member)				
□Sound □Microphone (single) □ Projection Device (\$50) □Stage Crew (\$8/hr. per crew member)				



Use of Facility Indemnification Agreement

Crawford Central School District 11280 Mercer Pike Meadville, PA 16335	Date/
As part of the consideration of allowing the und of the Crawford Central School District as ic	ersigned to use the facilities/grounds
indemnify and hold harmless the Crawford Common Board members, agents, and employees from demands, fees, fines, proceedings, actions, and nature arising or growing out of or in any way facilities/grounds, including liability incurred Crawford Central School District, its officers, agents.	entral School District, their officers, om and against all liability, claim d causes of action of any kind and connected with the said use of such l as a result of negligence of the
As part of the consideration for allowing the facilities/grounds of the Crawford Central Schereby agree to be totally responsible for a facilities/grounds of the Crawford Central Schousing the facilities/grounds in question. It is to facilities/grounds to make restitution for said daily the Crawford Central School District.	nool District as identified below, we any and all damages done to the ool District while said organization is tally up to the organization using the

Facility to be Used: ______ Date(s) of Use: ______

Representatives Name (please print): ______

Signature: _____ Date: _____

Organization Name: