

\*\* Long-term fee applies after one year's use of District facilities on a regular and recurring basis. The rate may not be avoided by changing sites.

**LYON COUNTY SCHOOL DISTRICT  
APPLICATION FOR COMMUNITY USE OF SCHOOL FACILITIES**

Through A

<u>Child's Eyes</u> (Name of organization)	<u>PO BOX 872</u> (Address)	<u>Vernaton NV</u> (City/State/Zip)	<u>715-344-8300</u> (Phone)
<u>Cathe Faretto</u> (Name of Person in Charge)	<u>PO BOX 872</u> (Address)	<u>Vernington NV</u> (City/State/Zip)	<u>775-722-0668</u> (Phone)

Date(s) of requested use: 6/5 + 6/6 Day(s) of week: \_\_\_\_\_

Set up time: from 1:30 am/pm to \_\_\_\_\_ am/pm Function time: from 11 am/pm to 4 am/pm

Nature/purpose of use: Dance recital

Anticipated attendance 250 Number of adults 160 Number 18 and under 100

Will there be an admission charge, collection or funds solicited?  yes  no

If yes, state amount: Adults \_\_\_\_\_ Children \_\_\_\_\_

For what purpose will proceeds be used? \_\_\_\_\_

Insurance company and agent (school groups exempt) Eric Bodenstein  
(a certificate of property damage and liability insurance for at least \$100,00/\$100,00/\$300,00 must be provided prior to approval)

**AGREEMENT** The applicant hereby makes application for use of the school facility(ies) described above, and certifies that the information given is correct. The applicant will observe all rules and regulations of the Board of Trustees and has read the Administrative Regulation "Community Use of Facilities". The applicant agrees to exercise the utmost care in the use of the school premises and property and to hold the Lyon County School District harmless from all liability resulting from use of said facilities. The applicant further agrees to reimburse the School District for any damages arising from the applicant's usage.

Through A

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Signature of applicant: [Signature] date: 03/18/2016

**FOR OFFICIAL USE ONLY**

Certificate of insurance received?  yes  no

FEES		Comments:
Facility Rent	\$	
Personnel	\$	
Kitchen/Life Skills Utilities	\$	
Equipment	\$	
<b>Total Fees</b>	<b>\$</b>	

Approved by: \_\_\_\_\_

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

Administrator's Signature \_\_\_\_\_

**DETAILED FACILITY REQUEST FORM**

	First Room	Second Room	Third Room
Room preference (i.e. Classroom, multipurpose room, gym)	YHS Gym		
Anticipated attendance	250		
Responsible person	Cathe Faretto		
Stacking chairs			
Student desks			
Tables			
VCR/TV			
Overhead			
Screen			
Basketball hoops up or down (gym only)	up		
Cafeteria tables (MP room only)			
Flags			
Podium			
P.A. system	✓		
Trash cans	✓		
Power extension cords			
Other:	floor cover		

Additional comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*Items listed may or may not be available for public use and are subject to additional use fees.*

**For official use only:**

Room assigned			
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