

181 Community Consolidated School District 181 – Request for Use of School Facilities + Invoice

• All applications must be made at least **two weeks** in advance of the function • Faxes **not** accepted • Date: _____

The undersigned represents that s/he is authorized to act in this request for the organization named in this request; agrees to pay the total charges **within 30 days** after the last rental date (cancellations must be made five (5) days in advance of the rental date); understands that the granting of this request does not constitute recognition of such organization as a school-connected activity; agrees that such organization will not represent itself or any of its activities as school connected; agrees that such organization using school facilities shall be liable for any and all claims and demands for action which may at any time be made or instituted against School District 181 arising out of their occupancy of any part of the building; has included with this Request a current Certificate of Insurance naming CCSD181 as the Certificate Holder (if not already on file this school year) and agrees to adhere to the rules and regulations for the use of school properties contained in the District 181 Administrative Procedures Manual (attached). **NOTE: NO FOOD** or beverages are allowed in the building w/o prior approval due to food allergies! Check w/the school secretary. Invoice is shown below.

Signed _____ Please print signature _____

Phone (daytime) _____ (evening) _____ Email: _____

Name of Organization _____ Check one: Not-for profit For profit

Full Address (**must complete!**) _____

Function _____ 100+ participants? yes (see below) no

School wanted _____ Space wanted (check appropriate area(s) shown below):

classroom(s)/how many: _____ gym & MPR MPR only gym only other (specify): _____

Date(s) wanted (**be specific-list all** or attach separate sheet w/all dates): _____

Time needed: from (doors opened) _____ to _____ (some extra time may be required for set-up/clean-up)

Number of chairs needed: _____ Number of tables needed: _____ (Indicate arrangement of chairs/tables on separate sheet)

Will public address system be used? yes no other equipment (specify) _____

[Explain on separate sheet how stage and general lighting will be operated, if applicable, or any other necessary instructions]

The administration **requires** a **Certificate of Insurance** naming *Community Consolidated School District 181* as the Certificate Holder in the required following minimum amounts: Bodily injury liability: \$250,000 each person, \$1,000,000 each accident; Property damage liability: \$10,000 each accident. A current Certificate of Insurance **must be** either on file or included with this form.

----- To be filled in by the School District -----

Certificate of Insurance included: yes already on file (Resubmit yearly/school yr) No building use w/o Certificate of Insurance.

Signed AED (automated external defibrillator) requirement included – this is **only** for rentals of 100 or more, per Illinois State law.

Overtime anticipated? yes no • If “Yes” who will work? _____ (✓ w/head custodian 1st)

Note: If set-up/clean-up is required, 1 hr overtime (\$25) charged. Comments re: overtime: _____

1. Confirmation of school secretary: _____ This has been put on the school calendar

2. Approved by Principal of building: _____ (if staff member, send to HR for approval) Date _____

3. Approved by Buildings & Grounds: _____ Date _____

To be filled in by the School District

----- Detach **Invoice here & return w/payment** -----

INVOICE payable at end of rental – full amount due unless 5 days’ cancellation notice is given

Name of Organization: _____ School being used: _____

Rental charges: _____ Rental Category: _____ Other charges: _____

Custodial charges: _____ **Total charges*** _____ Due: _____

*Payable **at the end** of the rental period (please do **not** pay before end of rental) to: **Community Consolidated School District 181**

Mail to: CCSD 181 Buildings & Grounds • 115 W. 55th Street • Clarendon Hills, IL 60514 630-861-4981

Request for Use of School Facilities

This form shall be signed by the requestor shall accompany all usage requests submitted to the school secretary; otherwise the application for usage will be rejected.

It is hereby incorporated and made a part of the Request for Use of School Facilities form to which it is attached.

The requestor has read, understands and accepts the terms of the school district's Food Allergy Management Plan, which is posted on the District Website (D181.org) and hereby agrees to adhere to its provisions. Relevant portions of the Plan are excerpted below.

If said provisions are violated, the requestor understands and accepts that any facilities usage previously granted will be terminated.

School District 181 Food allergy Management Plan

1. After-school enrichment, before-school care, or other programs held in school classrooms must follow the daily snack guidelines.
 - In the elementary schools, fruits and vegetables are allowed in classrooms.
 - In the middle schools, fruits and vegetables, as well as cheese, Goldfish crackers, Original Skinny Pop brand popcorn, meat jerky, meat sticks, and lunchmeat are allowed in classrooms.
 - Peanuts or tree nuts *are never allowed* to be eaten in any classroom.
2. Other food items brought into D181 facilities MUST be eaten in the cafeteria.
3. Peanuts or tree nuts are only allowed to be opened or eaten in the cafeteria.

If the plan is not followed the rental agreement will be cancelled and you will no longer be able to use our facilities.

Requestor

Date