



WEST CLERMONT LOCAL SCHOOL DISTRICT

4350 Aicholtz Road, Suite 220
Cincinnati, OH 45245
(513) 943-5000
www.westcler.org

Michelle Clark – Administrative Assistant
Lance Perry – Director of Operations

Facility Use Application

Date: _____

Name of organization: _____ Phone: _____

Address: _____

Contact name: _____ Phone: _____

Person in charge of event: _____ Phone: _____

Email: _____

Will a fee be charged for the event? (If *YES* how much): _____

Purpose of function (Please provide a brief description): _____

Building(s) requested: _____

District facility requested (specify rooms and/or areas): _____

Date(s) requested: _____

Hours requested : _____

Estimated number of attendees: _____

Will you employ individuals to work the rental event? _____ If *YES*, please attach the appropriate proof of Worker’s Compensation coverage from the State of Ohio.

Will there be any serving or selling of any food products by the Sponsor or Organization at this event? _____ *NO* _____ If *YES*. The concession facilities may not always be available during certain times of the year. All rules and regulations in the administrative guidelines in regards to the sale of concessions must be followed. The athletic booster organizations at each High School have the first right to sell concessions during any rental of athletic facilities.

Please note that drinks are not permitted in our gym or theatre facilities.

Refusal to abide by this policy may result in disapproval of future requests.

*All Facility Rental Documents are to be submitted to the school’s main office.



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Special services or equipment requested (*NOTE: As a school district, we may not be able to accommodate all service or equipment requests*): _____

This application covers only the dates, times, rooms, and equipment listed.

Any additions will result in additional charges.

Estimated Rental Fee

Facility/Area _____	\$ _____
Requested _____	\$ _____
_____	\$ _____
_____	\$ _____

Personnel Required: Custodial ____ \$40 p/hr (x 3 hr. min.) = \$ _____
 Cafeteria ____ \$30 p/hr (x 3 hr. min.) = \$ _____

TOTAL FEES = \$ _____

A school custodian shall be on duty whenever a facility is being used.
The custodian's overtime, including clean-up time, will be charged at the appropriate hourly rate.
Food-service personnel shall be required, in addition, when kitchen facilities are requested.

- Copy of current Certificate of Liability Insurance must be on file prior to start of activity. –

By signing this application, the individual representing the renting group or organization affirms that he/she has been given a copy of the rules and regulations governing the use of the facilities.

Hold Harmless Agreement (*This section must be completed by the Applicant.*)

_____ (Renter) agrees to indemnify the West Clermont Local School District Board of Education (the "Board"), its members, employees and agents and to forever hold them harmless from and against all expenses, liabilities, claims, suits or judgments of every kind whatsoever, including attorney's fees and court costs, by or on behalf of any person, firm or corporation, arising out of Renter's use of the facility, including any acts or omissions of the Board, its members, employees or agents. This indemnification shall be construed to apply to the fullest extent permissible by law. Renter shall be liable for reasonable attorney's fees and the cost of litigation associated with enforcement of the obligations set forth in this Agreement.

Renter hereby represents and acknowledges that Renter fully understands the terms of this Agreement and their significance. Renter further acknowledges that Renter has been notified that the West Clermont's Facilities Use Regulations and Guidelines are viewable on the District's website and agrees to abide by said Regulations and Guidelines.

Renter's signature: _____ Date: _____

Building Principal's signature _____ Date: _____

Approved: _____ Disapproved: _____

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