

Original Application  
Change Requested

LEWISTON-PORTER CENTRAL SCHOOL  
APPLICATION FOR USE OF SCHOOL FACILITY

3260F

Date of Event \_\_\_\_\_

Organization \_\_\_\_\_

BUILDING REQUESTED				
Senior	Middle	Intermed. IEC	Primary PEC	C.R.C.

Type of Activity \_\_\_\_\_  
am \_\_\_\_\_ am  
Time Requested \_\_\_\_\_ pm \_\_\_\_\_ pm

Services Requested: If you require a special set-up,  
please provide/attach a description or diagram.

Facilities Requested:

Auditorium \_\_\_\_\_ Pool \_\_\_\_\_  
 Gymnasium \_\_\_\_\_ Girl's Lockers \_\_\_\_\_  
 Kitchen \_\_\_\_\_ Boy's Lockers \_\_\_\_\_  
 Cafeteria \_\_\_\_\_ Playfield \_\_\_\_\_  
 Classroom \_\_\_\_\_ Stadium:  $\sqrt$  below \_\_\_\_\_  
 Tennis Court \_\_\_\_\_ Elia \_\_\_\_\_ Blakeslee \_\_\_\_\_  
 Baseball Field \_\_\_\_\_ Softball Field \_\_\_\_\_

Security Supervision \_\_\_\_\_

Audio/Visual Personnel \_\_\_\_\_

Audio/Visual Equipment:

a. Microphone \_\_\_\_\_ d. Projectors \_\_\_\_\_  
 b. Tape Recording \_\_\_\_\_ e. Stage  
 c. Spotlights \_\_\_\_\_ Lighting \_\_\_\_\_

(To be completed by the Office of Administrative Services)

Rental Fees: add'l charge assessed for lining on overtime  
(See #13 on reverse for special considerations on fees)

Other Charges:

\*Artificial Turf (Blakeslee)... \$400.00 (add \$100 w/ lights)  
 \*Natural Turf (Elia)..... 300.00 " " "  
 \*Other athletic fields..... 125 .00  
 \*Gymnasium..... 150.00  
 Cafeteria (without kitchen)... 100.00  
 \*Cafeteria (with kitchen) ... 200.00  
 Locker Room .....(each) 75.00  
 \*Auditorium ..... 250.00  
 Classroom .....(each) 50.00  
 \*Pool ..... 150.00  
 Baseball Field..... 175.00  
 Softball Field..... 125.00  
 Tennis Court..... 150.00  
 \*Minimum charge for 3 hours or less  
 Each additional hour is \$50.00.  
 If admission is charged, 5% of the total  
 admissions will be assessed.

	Per Hr.	Total
Custodial _____ hrs.	@ _____	= \$ _____
Cleaning _____ hrs.	@ _____	= \$ _____
Grounds _____ hrs.	@ _____	= \$ _____
**A/V Pers _____ hrs.	@ _____	= \$ _____
Other _____ hrs.	@ _____	= \$ _____

PLEASE PAY THE CHARGES LISTED BELOW:

Rental Fees \$ \_\_\_\_\_  
 Other Charges \$ \_\_\_\_\_  
 Less Deposit Rec'd. \$ \_\_\_\_\_  
 5% of Gross Admissions \$ \_\_\_\_\_

\*\*Name of person from your organization that  
will be responsible and present at the function:

TOTAL DUE \$ \_\_\_\_\_

Phone # \_\_\_\_\_

Make checks payable to: Lewiston-Porter CSD  
mail to: 4061 Creek Road, Youngstown, NY 14174

Applicant's Name \_\_\_\_\_  
(Please print)

Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Address \_\_\_\_\_

Copy Distribution

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_

- \_\_\_ Applicant
- \_\_\_ Principal
- \_\_\_ Custodian
- \_\_\_ Bldgs. & Grounds
- \_\_\_ Audio/Visual Personnel
- \_\_\_ Other \_\_\_\_\_

Approved \_\_\_\_\_

Date of Approval \_\_\_\_\_

PLEASE READ OTHER SIDE FOR ADDITIONAL INFORMATION

1. The applicant in charge of this activity shall assume full responsibility for proper supervision and shall agree to assume responsibility for payments of costs for any damages sustained in facility usage.
2. Smoking is not permitted on school grounds for these functions, nor is alcohol permitted.
3. Only the room/s or designated area/s granted in the original request shall be used.
4. Classroom material and/or equipment are not to be used without specific permission, and audio/visual equipment shall not be used unless operated by school personnel.
5. All rooms and areas are to be left in an orderly condition after usage.
6. All money transactions will be handled through the Office of Administrative Services.
7. Up-to-date Certified Life Saving Certificates must be on file for all user-provided pool supervising personnel.
8. A copy of this request must be submitted to the Office of Administrative Services fifteen (15) business days prior to the time of the event.
9. Applicant may only use the facilities requested during the times requested. Any changes in time must be approved by the Director of Facilities.
10. Separate forms must be completed for each day requested. Therefore, should the same event be scheduled for two or more days, it will be necessary to submit a separate form covering each of these dates.
11. Any security supervision requests from outside groups will be charged at the going rate.
12. If this Application for Use of School Facility is approved, that approval will be subject to the execution of a Facilities Use Agreement (a sample of which is attached) and compliance with all insurance requirements. Specific insurance requirements will be determined upon receipt of a signed application and sent to you with a Facilities Use Agreement. Final approval for use of the premises will follow LPCSD's receipt of the signed Facilities Use Agreement and an acceptable certificate of insurance evidencing all required insurance coverages. The forms must be signed and the Certificate of Insurance must be received no less than ten (10) business days prior to the event.
13. District residents applying for use of our facilities, where the organization has 50% or more resident participants, a 50% discount to the rental fees will apply. Proof will need to be provided.

I have read and understand the above guidelines:

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Applicant's Signature

LMT  
Revised 2/2016