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Utilization of School Facilities Form

Policy 707 Attachment

SECTION I – *To be completed by person requesting utilization of school facilities.*

Name of Organization: _____

Officer or Individual Responsible: _____

Address: _____

Phone Number: _____ email: _____

Please select the best class that describes your organization: *(see attached School Board Policy for additional information).*

School District Related

Non-Profit WASD Resident Organization

Profit or Non-WASD Resident
Organization

Which facility does your organization wish to use?

Seneca High School Middle School Elementary Center Athletic Fields
Facility to be used for: _____

Dates(s) desired _____ has this been verified by the school office? Yes No

Number of participants _____

Will funds be raised at this event? Yes / No

Will Games of Chance be conducted? Yes / No

Date(s)	Time Facility to Be Opened	Time Event Starts	Time Event Ends	Total Hours of Activity
_____	_____ AM/PM	_____ AM/PM	_____ AM/PM	_____
_____	_____ AM/PM	_____ AM/PM	_____ AM/PM	_____
_____	_____ AM/PM	_____ AM/PM	_____ AM/PM	_____
_____	_____ AM/PM	_____ AM/PM	_____ AM/PM	_____

Specific area(s) needed for this request:

Auditorium	Commons (SHS)	Gymnasium	Kitchen
Classroom (# needed) _____	Conf Room	Computer Lab	Cafeteria Dining Room
Football Field	Concession Stand	Boys' Locker Room	Girls' Locker Room
Baseball Field	Softball Field	Other (specify):	

Special Request:

Special Request would include number of tables needed, audiovisual equipment needed, PA equipment needed, etc.

I have read and understand the attached School District Policy Number 707 regarding the Utilization of School Facilities. I will be responsible for compliance with this policy during the period of use. I acknowledge and agree to pay any fees, if applicable. I also understand that a contract may be issued upon Board of Education approval.

Name Printed

Signature

Date:

SECTION II– *To be completed by Building Principal*

- | | | |
|--|-----------------------|--|
| 1. Are the date(s) requested available? | Yes
Continue to #2 | No
Contact Organization |
| 2. Does the request meet school Board Policy 707? | Yes
Continue to #3 | No
Contact Organization |
| 3. Do you approve this Building Request? | Yes
Continue to #4 | No
Contact Organization |
| 4. Is this request a Class I (School District Related) organization?
<i>Note: Class 1 organizations do not require Board of Education approval.</i> | Yes
Continue to #5 | No
Sign/Date/Forward to
Business Administrator |
| 5. Contact appropriate supervisors so they can ensure staff are scheduled to be on duty.
Sign, date, and forward request to: Plant Operations Supervisor, Custodial Supervisor, Athletic Director,
Information Technology Systems Supervisor and Business Administrator. | | |

Building Principal's Signature

Date

SECTION III– *To be completed by Business Administrator or designee*

- | | |
|--|-----------------------------------|
| 1. Contact Supervisors to ensure event is staffed. | Date Completed: _____ Init. _____ |
| 2. Contact organization to inform them of estimated fees for this request: | |
| Facility Use Fee | |
| Staff Fee | _____ |
| Total Fee Estimate | |
| | Date Completed: _____ Init. _____ |
| 3. If organization tentatively agree to fees, forward to Superintendent. | |

SECTION IV – *Superintendent*

Approved Yes No

Superintendent's Signature

Date

SECTION IV – Board of Education

Approved Yes No

Date

AGREEMENT

I have read, understand and agree to abide by Wattsburg Area School Policy 707, especially the General Conditions section, regarding the Utilization of School Facilities during the period of use as stipulated in Section I of this form. I acknowledge and agree to the estimated fee of \$_____, and that, upon completion and inspection of the facility, the district business office will invoice me for the actual fees. Also, for Class III Organizations, a non-refundable deposit of 25% of the estimated charges will be required when this agreement is signed. **User holds the school district harmless from all claims for injury to, or death of any person, and for damage to, or loss of any property arising out of, or attributed directly or indirectly to the operations or omissions of the school district. User indemnifies the school district for all damage to property belonging to the school district and for all injuries to, or the deaths of any representative or employee of the school district resulting from all acts or omissions of user.**

Business Administrator's Signature

Date

Organization Representative Signature

Date

SCHEDULE OF FEES

	Class I	Class II	Class III	Class IV
Auditorium, Gymnasium, Kitchen or Videoconference Room	No Fee*	\$32 up to 4 hours, plus \$8 for each additional hour	\$64 up to 4 hours, plus \$16 for each additional hour	Negotiable
Cafeteria Dining, Gathering Area, Computer Lab or Locker Room	No Fee*	\$24 up to 4 hours, plus \$6 for each additional hour	\$48 up to 4 hours, plus \$12 for each additional hour	Negotiable
Classroom	No Fee*	\$16 up to 4 hours, plus \$4 for each additional hour	\$32 up to 4 hours, plus \$8 for each additional hour	Negotiable
Conference Room and Meeting Room	No Fee*	\$8 up to 4 hours, plus \$2 for each additional hour	\$16 up to 4 hours, plus \$4 for each additional hour	Negotiable
Football Field	No Fee*	\$125 per hour	\$250 per hour	Negotiable
Baseball or Softball Field	No Fee*	\$75 per hour	\$150 per hour	Negotiable
Other Fields	No Fee*	\$48 up to 4 hours, plus \$12 for each additional hour	\$96 up to 4 hours, plus \$24 for each additional hour	Negotiable
Concession Stand	No Fee*	\$32 up to 4 hours, plus \$8 for each additional hour	\$64 up to 4 hours, plus \$16 for each additional hour	Negotiable

* Custodial, cafeteria and technology fees will be assessed if those personnel are not scheduled to be on duty.

Class II, Class III and Class IV will also be subject to all fees and expenses incurred by the school district over and above rental charges for said facility used. Examples are custodial, cafeteria and technology wages and benefits, ISDN telephone lines, and videoconference equipment.