EAU CLAIRE AREA SCHOOL DISTRICT

July 1, 2017

APPLICATION FOR FACILITY USE

Service Center
623 N Hastings Way,
Eau Claire, WI 54703
Fax 715-852-3154

DESCRIPTION OF EVENT (e.g. Boys-8 BB Practice, Association Meeting, etc.) (Required):

ORGANIZATION NAME:

APPLICANT OR CONTACT NAME (Required):

STREET ADDRESS:

STREET ADDRESS (Required):

CITY: **STATE:** **ZIP:**

CITY (Required): **STATE** (Required): **ZIP** (Required):

PHONE:

PHONE 1: ☐ **cell** ☐ **house** ☐ **work**

PHONE 2: ☐ **cell** ☐ **house** ☐ **work**

EMAIL:

EMAIL (Required):

NAME & TITLE of ORGANIZATION REPRESENTATIVE (such as President, Treasurer):

ALTERNATE CONTACT NAME:

ALTERNATE'S PHONE: ☐ **cell** ☐ **house** ☐ **work**

ALTERNATE'S EMAIL:

IS THE ORGANIZATION PAYING THE ECASD FEES FOR THESE EVENTS? **Yes** ☐ **No** ☐

IS THE ORGANIZATION PROVIDING LIABILITY INSURANCE COVERAGE? **Yes** ☐ **No** ☐

_____

Signature of AUTHORIZED Organization Representative

SITE/BUILDING REQUESTED (Required):

ALTERNATE SITE(S):

ROOMS/AREAS REQUESTED (Required):

START TIME (Required): **END TIME** (Required):

TYPE OF ACTIVITY (Required):

NUMBER YOUTH ATTENDING _____ **GRADE:** _____ **or AGE:** _____

NUMBER ADULTS ATTENDING _____ **GENDER:** _____

DAY(S) OF WEEK REQUESTED:

DATES OF USE: (each INDIVIDUAL date MUST be listed—no date ranges):

DOES THIS REQUEST INCLUDE/INVOLVE ANIMALS (Required)? **Yes** ☐ **No** ☐

DO YOU WANT TO SERVE FOOD AT YOUR EVENT(S) (Required)? **Yes** ☐ **No** ☐

DOES YOUR EVENT(S) HAVE AN ADMISSION COST (Required)? **Yes** ☐ **No** ☐

SPECIAL SET UP REQUESTS (other than for Auditorium or Kitchen):

NOTE: Basketball hoops may only be adjusted by Buildings & Grounds staff.

If KITCHEN is requested, you MUST SUBMIT a KITCHEN FORM.
The KITCHEN FORM can be found on the Facility Use/Rental webpage: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental

If AUDITORIUM is requested, you MUST SUBMIT an AUDITORIUM FORM.
The AUDITORIUM FORM can be found on the Facility Use/Rental webpage: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental

DO YOU HAVE A W9 ON FILE WITH ECASD? **Yes** ☐ **No** ☐ A W9 FORM FOR BILLING PURPOSES IS REQUIRED TO BE ON FILE FOR ALL APPLICANTS.

The W9 form can be found on the Facility Use/Rental webpage: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental.

INSURANCE REQUIREMENTS

INDIVIDUALS:

If you are an individual who has put together a CASUAL/INFORMAL group where no money/ BARTER is exchanged, the person requesting the use of our building will need to have homeowner or renter insurance coverage of no less than $100,000 of general liability coverage per occurrence/aggregate. There will be no requirement for naming the District as an Additional Insured on a homeowners or renters policy.

☐ YES, I AM AN INDIVIDUAL AND I HAVE HOMEOWNERS/ RENTERS INSURANCE FOR THE LIABILITY LIMIT REQUESTED ABOVE.

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Signature of Applicant

ORGANIZATIONS:

If you are an Organization or Entity, or operating under an organization name, you will need to provide a certificate of liability insurance from your insurance company listing ***Eau Claire Area School District as an "Additional Insured"*** on the policy, including all carrier exclusions, endorsements, and provisions that limit or expand coverage. The User shall maintain the following minimum levels of coverage during the term of the agreement for general liability (including volunteers, if used):

$1,000,000 Per Occurrence – Commercial General Liability, and
$1,000,000 Aggregate – Commercial General Liability, and
$1,000,000 Umbrella Liability

or

$1,000,000 Per Occurrence – Commercial General Liability, and
$2,000,000 Aggregate – Commercial General Liability

A sample of the "Additional Insured" endorsement can be found on the Facility Use/Rental webpage: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental.

☐ YES, MY ORGANIZATION'S CERTIFICATE OF LIABILITY INSURANCE INCLUDING ALL CARRIER EXCLUSIONS, ENDORSEMENTS, AND PROVISIONS THAT LIMIT OR EXPAND COVERAGE IS ATTACHED OR IS ALREADY ON FILE WITH THE ECASD.

☐ UPDATED DOCUMENTATION WILL BE PROVIDED WHEN POLICY RENEWS.

_____

Signature of Organization's AUTHORIZED Representative

The User agrees to take all necessary precautions to safeguard to the public against damages or injury and to hold the Eau Claire Area School District harmless from any and all damages, expense, costs and reasonable attorney's fees on account of injury to person, life or property or injury resulting in the death of any person or persons in any manner arising out of or in connection with the rental, use and occupancy of school district buildings or property, or the ways adjoining thereof. If the Eau Claire Area School District is made a party to any suit or litigation on account of injury or damage or alleged injury or damage to person, life, or property or on account of an injury or damage or alleged injury resulting in the death of any person or persons, arising out of or in connection with the rental, use and occupancy of school district buildings or property, or the ways adjoining, thereof, the User will defend such actions on behalf of the Eau Claire Area School District, including claims and causes of actions at common law or arising under any statute. If judgment shall be obtained or claims allowed against the Eau Claire Area School District, the User will pay and satisfy such judgment or claim in full.

I have read and understand the Conditions of Use for Building Rental and the Rental Rate Schedule, and agree to abide by them. I agree to pay all applicable rental rates and other charges incurred for this rental.

*** * *** ***SIGNING THIS FORM ELECTRONICALLY IS DEEMED TO BE A SIGNATURE ACCEPTING THE TERMS AND CONDITIONS OF FACILITY RENTALS.***

SIGNATURES (REQUIRED)

APPLICANT:	**DATE:**
CO-SPONSOR (Optional):	**DATE:**

APPLICATION FEE

One-time, non-refundable fee. Amount is based upon the number of event dates requested per schedule. (Schedule = same event, same location/room/area, and same start/end times.)

		Rate A	Rate B	Rate C
1	Date Requested	$ 14.00	$ 14.00	$ 28.00
2 – 5	Dates Requested	$ 18.00	$ 18.00	$ 36.00
6 – 10	Dates Requested	$ 21.00	$ 21.00	$ 42.00
11 – 20	Dates Requested	$ 28.00	$ 28.00	$ 56.00
Over 20	Dates Requested	$ 56.00	$ 56.00	$ 112.00

CANCELLATION FEE

Users shall notify the Building & Grounds Department of any cancellation of an approved use at least 5 business days in advance. There is a $10 Cancellation Fee plus the listed rental fee for the space(s) scheduled, at Rate B on the Fee Schedule, for each date that is cancelled with less than 5 business days' notice.

NO SHOW FEE

Users who do not show up for an approved scheduled event will be charged the same as users who cancel late.

ADDITIONAL FEES

Requesting additional dates will require completing another Application for Building Use and paying an additional Application Fee. Additional custodial fees, usage fees, etc. may also apply based on areas & equipment requested, day of the week, hours of use, etc.

The ***Fee Schedule*** and ***Conditions of Use*** can be viewed at: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental.

Required paperwork must be submitted prior to being scheduled on the Facility Use Calendar.
Note: Incomplete forms may delay processing.

- **APPLICATION FOR BUILDING USE** completed and signed.
- **INSURANCE SECTION COMPLETED** Homeowners section signed or submit ORGANIZATION CERTIFICATE OF LIABILITY endorsed with the "*Eau Claire Area School District is listed as Additional Insured*" statement. Including all carrier exclusions, endorsements, and provisions that limit or expand coverage.
- **W9 FORM** (this is required only for first time applicants).

Forms can be submitted in the following way:

Email to: facilityuse@ecasd.us
Fax to: 715-852-3154
Drop off at: ECASD Service Center @ 623 N Hastings Way, Eau Claire (next to U-Haul)
US Mail to: ECASD Service Center, 623 N Hastings Way, Eau Claire, WI 54703

EAU CLAIRE AREA SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER