

APPLICATION FOR FACILITY USE

For dates after 8/31/2023

| 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 (Re | | | ZIP (R | equired): | PHONE: | | | |
| PHONE 1: | | □ cell | □house | work | EMAIL: | | | |
| PHONE 2: | | 🗌 cell | ☐ house | work | | | | |
| EMAIL (Required): | | | | | NAME & TITLE of ORGANIZATION REPRESENTATIVE (such as President, Treasurer): | | | |
| ALTERNATE CONTACT NAME: | | | | | IS THE ORGANIZATION PAYING THE ECASD FEES FOR THESE EVENTS? Yes No | | | |
| ALTERNATE'S PHONE: | | | 🗌 house | work | IS THE ORGANIZATION PROVIDING LIABILITY INSURANCE COVERAGE? Yes No | | | |
| ALTERNATE'S EMAIL: | | | | | Signature of AUTHORIZED Organization Representative | | | |
| SITE/BUILDING R | REQUESTED (Required): | | | | DAY(S) OF WEEK REQUESTED: | | | |
| ALTERNATE SITI | E(S): | | | | DATES OF USE: (each INDIVIDUAL date MUST be listed—no date ranges): | | | |
| ROOMS/AREAS | REQUESTED (Required): | | | | | | | |
| | | | N. | | | | | |
| START TIME (Required): END TIME (Required): | | | 1): | | | | | |
| NUMBER ATTEN | DING (Required): | | | | | | | |
| DESCRIBE the T | YPE OF ACTIVITY (Required) | 1): | | | | | | |
| | | | | | | | | |
| DOES THIS REQUEST INCLUDE/INVOLVE ANIMALS (Required)? Yes No | | | | | SPECIAL SET UP REQUESTS (other than for Auditorium or Kitchen): | | | |
| DO YOU WANT T | O SERVE FOOD AT YOUR | EVENT(S) (Required) | Yes | No | | | | |
| | I Claire City/County Healt | | | | | | | |
| | | | ia regulati | | NOTE: Basketball hoops may only be adjusted by Buildings & Grounds staff. | | | |
| The k | 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/D | | | | | ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental | | | |
| DO YOU HAVE | A W9 ON FILE WITH EC | | | | | | | |
| The W9 form can be found on the Facility Use/Rental webpage: <u>www.ecasd.us/Depa</u> | | | | | OR BILLING PURPOSES IS REQUIRED TO BE ON FILE FOR ALL APPLICANTS. | | | |
| INDIVIDUALS: ORGANIZATION | | | | | | | | |
| INDIVI | , | | e: <u>www.ec</u> | asd.us/Dep | artments/Buildings-and-Grounds/Facility-Use-Rental. | | | |
| lf you | DUALS: u are an individual user | Use/Rental webpag | e: <u>www.ec</u> ORGAN If you | asd.us/Dep NIZATIONS I are an Oi | artments/Buildings-and-Grounds/Facility-Use-Rental. S: ganization or Entity, or operating under an organization name, you will | | | |
| lf you Insur | DUALS: u are an individual user ance document at the i | Use/Rental webpag , and the ight is | e: <u>www.ec</u> ORGAN If you need | asd.us/Dep NIZATIONS I are an Oi to provide | artments/Buildings-and-Grounds/Facility-Use-Rental. S: ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing | | | |
| lf you Insur unatt | DUALS: u are an individual user ance document at the u ainable, you may provio | Use/Rental webpag , and the ight is de a certificate of | e: <u>www.ecc</u> ORGAN If you need <i>Eau</i> (| asd.us/Dep NIZATIONS I are an Oi to provide Claire Are | artments/Buildings-and-Grounds/Facility-Use-Rental. G: ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the n ainable, you may provi ance evidencing homeo | Use/Rental webpag , and the ight is de a certificate of owner or renter | e: <u>www.ec</u> ORGAN If you need <i>Eau</i> (carrie | asd.us/Dep NIZATIONS are an Or to provide Claire Are er exclusion | artments/Buildings-and-Grounds/Facility-Use-Rental. S: ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the n ainable, you may provi ance evidencing homeo ance coverage of no le | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 | e: <u>www.ec</u> ORGAN If you need <i>Eau</i> (carrie shall | asd.us/Dep NIZATIONS a are an Ou to provide Claire Are er exclusion maintain th | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all as, endorsements, and provisions that limit or expand coverage. The User | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the n ainable, you may provi ance evidencing homeo ance coverage of no le eneral liability coverage | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per | e: www.ecc ORGAN If you need <i>Eau</i> (carrie shall for ge | asd.us/Dep NIZATIONS are an Or to provide Claire Are er exclusion maintain th eneral liabi | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the n ainable, you may provi ance evidencing homeo ance coverage of no le | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area | e: <u>www.ecc</u> ORGAN If you need <i>Eau</i> carrie shall for ge | asd.us/Dep NIZATIONS are an Or to provide Claire Are er exclusion maintain th eneral liabi 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all as, endorsements, and provisions that limit or expand coverage. The User ne following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the n ainable, you may provis ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an | e: <u>www.ecc</u> ORGAN If you need <i>Eau</i> (carrie shall for ge \$ | asd.us/Dep NIZATIONS a are an Ou to provide Claire Are er exclusion maintain th eneral liabi 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): | | | |
| lf you Insur unatt insur | DUALS: u are an individual user ance document at the u ainable, you may provid ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l pol District shall be nam | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. | e: www.ecc ORGAN If you need <i>Eau</i> (carrie shall for ge \$ \$ | asd.us/Dep NIZATIONS a are an Ou to provide <i>Claire Are</i> or exclusion maintain th eneral liabi 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention Or | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ainable, you may provid ance evidencing homeon ance coverage of no le eneral liability coverage rrence/aggregate. The loo District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEON | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. DUAL AND HAVE WNERS/ | e: www.ecc ORGAN If you need <i>Eau</i> carrie shall for ge \$ \$ \$ | Are an Or to provide Claire Are er exclusion maintain th eneral liabi 1,000,000 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all is, endorsements, and provisions that limit or expand coverage. The User ne following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ainable, you may provident ance evidencing homeon ance coverage of no le eneral liability coverage rrence/aggregate. The le bol District shall be nam- ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEON RENTERS CERTIFICA | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. DUAL AND HAVE WNERS/ .TE OF | e: www.ecc ORGAN If you need Eau (carrie shall for ge \$ \$ \$ \$ | NIZATIONS are an Or to provide Claire Are ar exclusion maintain the aneral liabi 1,000,000 1,000,000 1,000,000 2,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and b O Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ainable, you may provid ance evidencing homeon ance coverage of no le eneral liability coverage rrence/aggregate. The loo District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEON | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. DUAL AND HAVE WNERS/ ITE OF DITIONAL | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Arrian and the second s | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all as, endorsements, and provisions that limit or expand coverage. The User the following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ance document at the n ance evidencing homeo ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l bol District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEO RENTERS CERTIFICA INSURANCE AND ADI | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. DUAL AND HAVE WNERS/ TE OF DITIONAL IENT WITH THE | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Area an Or to provide Claire Are or exclusion maintain the eneral liabi 1,000,000 1,000,000 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. S: ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all ns, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability "Additional Insured" endorsement can be found on the Facility page: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental. | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ance document at the n ance evidencing homeo ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l bol District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEO RENTERS CERTIFICA INSURANCE AND ADDI INSURED ENDORSEN ECASD DESIGNATED ADDITIONAL INSURE | Use/Rental webpag Use/Rental webpag de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. UAL AND HAVE WNERS/ .TE OF DITIONAL IENT WITH THE AS AN D FOR THE | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Area an Or to provide Claire Are r exclusion maintain the ereral liabi 1,000,000 1,000,000 1,000,000 2,000,000 1,000,000 anple of the Rental web _ YES, M | artments/Buildings-and-Grounds/Facility-Use-Rental. B: ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Wagregate – Commercial General Liability, and D Aggregate – Commercial General Liability | | | |
| lf you Insur unatt insur | DUALS: a are an individual user ance document at the n ance document at the n ance evidencing homeo ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l bol District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEO RENTERS CERTIFICA INSURANCE AND ADDI INSURED ENDORSEM ECASD DESIGNATED | Use/Rental webpag Use/Rental webpag de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. UAL AND HAVE WNERS/ .TE OF DITIONAL IENT WITH THE AS AN D FOR THE | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Area an Or to provide Claire Are r exclusion maintain the eneral liabi 1,000,000 1,000,000 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Wasser of the term of the agreement or the agreement or the commercial General Liability, and D Wasser of the term of the agreement of the agreement or the term of the agreement or the agreement or the term of the agreement or the term of the agreement or the term of the agreement of the term of the agreement or the term of the t | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ance document at the n ance evidencing homeo ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l bol District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEO RENTERS CERTIFICA INSURANCE AND ADDI INSURED ENDORSEN ECASD DESIGNATED ADDITIONAL INSURE | Use/Rental webpag Use/Rental webpag de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. UAL AND HAVE WNERS/ .TE OF DITIONAL IENT WITH THE AS AN D FOR THE | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Area an Or to provide Claire Are r exclusion maintain the eneral liabi 1,000,000 1,000,000 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User the following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Aggregate – Commercial General Liability "Additional Insured" endorsement can be found on the Facility page: www.ecasd.us/Departments/Buildings-and-Grounds/Facility-Use-Rental. Y ORGANIZATION'S CERTIFICATE OF LIABILITY INSURANCE ING ALL CARRIER EXCLUSIONS, ENDORSEMENTS, AND | | | |
| If you Insur unatt insur of ge occu Scho addit | DUALS: a are an individual user ance document at the n ance document at the n ance evidencing homeo ance evidencing homeo ance coverage of no le eneral liability coverage rrence/aggregate. The l bol District shall be nam ional insured/certificate YES, I AM AN INDIVIE PROVIDED A HOMEO RENTERS CERTIFICA INSURANCE AND ADDI INSURED ENDORSEN ECASD DESIGNATED ADDITIONAL INSURE | Use/Rental webpag , and the ight is de a certificate of owner or renter ss than \$250,000 per Eau Claire Area ed as an holder. OUAL AND HAVE WNERS/ ITE OF DITIONAL MENT WITH THE AS AN D FOR THE COVERAGE. | e: www.ecc ORGAN If you need Eau o carrie shall for ge \$ \$ \$ \$ \$ A sar | Area an Or to provide Claire Are r exclusion maintain the eneral liabi 1,000,000 1,000,000 1,000,000 1,000,000 | artments/Buildings-and-Grounds/Facility-Use-Rental. ganization or Entity, or operating under an organization name, you will a certificate of liability insurance from your insurance company listing a School District as an "Additional Insured" on the policy, including all hs, endorsements, and provisions that limit or expand coverage. The User he following minimum levels of coverage during the term of the agreement ity (including volunteers, if used): D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Umbrella Liability, that follows form and has \$0 retention or D Per Occurrence – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Aggregate – Commercial General Liability, and D Wasser of the term of the agreement or the agreement or the commercial General Liability, and D Wasser of the term of the agreement of the agreement or the term of the agreement or the agreement or the term of the agreement or the term of the agreement or the term of the agreement of the term of the agreement or the term of the t | | | |

ECASD APPLICATION FOR FACILITY USE—page 2

Contractor (below) agrees to defend, indemnify, and hold harmless District, its school board, administration, employees and volunteers, individually and collectively, from and against all costs, losses, claims, actions, attorney fees, and judgments arising from personal injuries, property damage, or otherwise, that may arise from or alleged to be caused by Contractor's negligence as a result of Contractor's use or occupancy District's land, facilities, or equipment. The Contractor agrees to provide, upon request, a certificate of insurance for liability coverage satisfactory to the District that names the District as an additional insured on said liability policy.

The District agrees to defend, indemnify, and hold harmless the User, its board, agents, employees and volunteers, individually and collectively, from and against all costs, losses, claims, actions, and judgments arising from personal injuries, property damage, or otherwise, that may arise from or alleged to be caused by District's negligence as a result of the User's use or occupancy of the District's land, facilities, or equipment while providing Services except if such cost, loss claim action or judgment is caused by the negligence of User.

I have read and understand the Eau Claire Area School District Facility Rental Conditions of Use and the Eau Claire Area School District Fee 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 USE/RENTAL.

SIGNATURES (REQUIRED)

| NAME OF ORGANIZATION/CONTRACTOR | | |
|---|-------------------------|----------------------------|
| PRINTED NAME OF AUTHORIZED ORGANIZATION REPRESENTATIVE: | TITLE OF AUTHORIZED ORC | GANIZATION REPRESENTATIVE: |
| SIGNATURE of AUTHORIZED ORGANIZATION REPRESENTATIVE: | | DATE SIGNED: |
| | | |

| PRINTED NAME OF AUTHORIZED ECASD REPRESENTATIVE: | TITLE OF AUTHORIZED ECA | SD REPRESENTATIVE: |
|--|-------------------------|--------------------|
| SIGNATURE OF AUTHORIZED ECASD REPRESENTATIVE: | | DATE SIGNED: |

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

THE FOLLOWING ITEMS MUST BE SUBMITTED:

- APPLICATION FEE An Annual Application/User fee must be paid before an application can be processed. Fee is based upon the amount of use per year. See the Fee Schedule for fee amount.
- W9 FORM (this is required only for first time applicants). Applications will not be processed without a current W9 on file.
- REQUIRED LIABILITY INSURANCE COVERAGE (must be provided to the Buildings & Grounds Office at least five (5) business days prior to earliest event date).

FORMS CAN BE SUBMITTED IN THE FOLLOWING WAYS:

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

Terms of this agreement are subject to District Discretion.

EAU CLAIRE AREA SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER