

SOLANCO SCHOOL DISTRICT
 121 S. Hess Street - Quarryville, PA 17566
 Tel 717-786-8401 Fax 717-786-8245

APPLICATION FOR USE OF SCHOOL FACILITIES

Please read all instructions on attached sheet before completion. Please submit only one copy of this form.

Organization Name: _____
 Purpose of Activity: _____
 Aim of Organization: _____

1. LOCATION REQUESTED: (please check only one -- complete separate form for each location.)

- | | | |
|---|---|--|
| <input type="checkbox"/> Administration Building | <input type="checkbox"/> Providence Elementary | <input type="checkbox"/> Swift Middle School |
| <input type="checkbox"/> Bart-Colerain Elementary | <input type="checkbox"/> Quarryville Elementary | <input type="checkbox"/> Solanco High School |
| <input type="checkbox"/> Clermont Elementary | <input type="checkbox"/> Smith Middle School | |

2. FACILITIES/ROOM(S) REQUESTED:

- | | |
|--|---|
| <input type="checkbox"/> All Purpose Room (QE only) | <input type="checkbox"/> Gymnasium (High School: <input type="checkbox"/> Large <input type="checkbox"/> Small) |
| <input type="checkbox"/> Auditorium (HS, Smith, Swift only) | <input type="checkbox"/> Hallways (specify: _____) |
| <input type="checkbox"/> Cafeteria (Bart, Prov, QE, Sm, HS only) | <input type="checkbox"/> Kitchen |
| <input type="checkbox"/> Cafeteria without stage (Clermont) | <input type="checkbox"/> Large Group Instruction (Smith, Swift, HS only) |
| <input type="checkbox"/> Cafeteria with stage (Swift) | <input type="checkbox"/> Lobby |
| <input type="checkbox"/> Classroom (specify: _____) | <input type="checkbox"/> Locker Room (HS only) |
| <input type="checkbox"/> Great Hall (HS only) | <input type="checkbox"/> Field (Specify Sport _____) |
| | <input type="checkbox"/> Other: (Specify _____) |

3. DATE(S) and TIMES REQUESTED: (Please indicate AM or PM. For more than 10 days, attach a separate sheet using the same format.)

NOTE: Building will be opened and available for use at the arrival time. All parties should be out of the building by departure time.

	1	2	3	4	5	6	7	8	9	10
Date:										
Arrival:										
Departure:										

4. IS THIS ACTIVITY EXCLUSIVELY FOR SOLANCO STUDENTS? YES or NO

5. WILL MONEY BE COLLECTED AT THIS ACTIVITY? YES or NO

6. IF YES TO QUESTION 5, FOR WHAT PURPOSE WILL THE MONEY BE USED?

7. WILL FOOD BE PREPARED IN THE CAFETERIA/KITCHEN? YES or NO

8. DO YOU INTEND TO UTILIZE CAFETERIA EQUIPMENT OR STAFF? YES or NO

IF YES, CONTACT THE FOOD SERVICE DIRECTOR TO ARRANGE DETAILS 717-786-8401

9. WILL YOU NEED CUSTODIAL SERVICES DURING THE ACTIVITY? YES or NO

The organization will be billed for these services. The district does not guarantee availability of custodian for requested time.

10. WILL YOU NEED ANY EQUIPMENT SETUP OR PROVIDED BY THE DISTRICT? YES or NO

Please specify: outside lights, PA system, sports equipment, microphones, video equipment, trash receptacles, special seating or setup needs, etc.

11. ESTIMATED NUMBER OF PARTICPANTS ATTENDING ACTIVITY? _____

Solanco School District Board Policy dictates that all applications for use of school facilities received prior to July 1 for use during the upcoming school year (July 1 - June 30) will be treated as if received on the same day, and prioritized according to board policy #707.

My signature below indicates that I have read the **INSTRUCTIONS FOR COMPLETION OF THE APPLICATION FOR USE OF SCHOOL FACILITIES**. I understand that the instructions summarize requirements of board policy #707. I understand and agree to comply with these policies and the following conditions:

1. Weekday use may be denied and/or rescinded when school is not in session (school vacations or cancellations due to inclement weather, etc.) Also it may be necessary for the District to rescind approvals when conflicts arise. Only rare occasions necessitate such action, but approvals are conditional.
2. Approved community use of facilities is automatically cancelled when school is closed for inclement weather, emergency or safety conditions. School cancellations are broadcast through local media.
3. A new application is requested to change information on a previously submitted application. Information on the previous application will be marked cancelled on the calendar and the new application's information added. If this application is for a change, please check here: _____
4. District administration holds the right to rescind use as a result of facility misuse.
5. An organization receiving approval to use school facilities assumes responsibility for the facility's cleanup upon completion of the organization's use. The school facility should be restored to the condition that existed prior to the organization's use.
6. Organizations may utilize cafeteria kitchen equipment **only** when district cafeteria staff have been scheduled and district staff operate the equipment. This includes access to district coolers and refrigerators.
7. All requests should be submitted at least two (2) weeks prior to the intended use.
8. Sunday requests and other unusual requests for the use of school buildings must receive board approval. Sunday use of school grounds, other than buildings, does not require board action.
9. A citizen, administrator, or faculty member of the district must sign below as the party responsible for use of the facilities.
10. Organizations not affiliated with the Solanco School District must attach a certificate of liability insurance listing the organization's name as the insured party.
11. Organizations requesting facilities for bingo or small games of chance must submit a copy of the appropriate license with this application or at least 10 days prior to the date of the requested event or tentative approval will be rescinded and request denied.
12. Participants must park in designated parking areas only. Do not park on the grass or along driveways.

Name: _____ Address: _____

Signature: _____

Date: _____ Phone #: _____

Email Address: _____

Forward completed application and certificate of liability insurance (if applicable) to: **Office of the Business Manager**

**Solanco School District
Administrative Building
121 South Hess Street
Quarryville, PA 17566**

District Use Only		
Estimated fee to be charged:	Rent	\$ _____
	Custodial	\$ _____
	Total	\$ _____
This total does not include cafeteria charges as they are invoiced separately.		