

Form # \_\_\_\_\_

**SOLANCO SCHOOL DISTRICT**  
**121 South 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.)**

\_\_\_\_\_ Administration Building      \_\_\_\_\_ Providence Elementary      \_\_\_\_\_ Swift Middle School

\_\_\_\_\_ Bart- Colerain Elementary      \_\_\_\_\_ Quarryville Elementary      \_\_\_\_\_ Solanco High School

\_\_\_\_\_ Clermont Elementary      \_\_\_\_\_ Smith Middle School

**2. FACILITIES/ROOM(S) REQUESTED:**

\_\_\_\_\_ All Purpose Room (QE only)      \_\_\_\_\_ Gymnasium (High School: \_\_\_\_\_ Large \_\_\_\_\_ Small)

\_\_\_\_\_ Auditorium (HS, Smith, Swift only)      \_\_\_\_\_ Hallways (Specify: \_\_\_\_\_)

\_\_\_\_\_ Cafeteria (Bart, Prov, QE, SM, HS only)      \_\_\_\_\_ Kitchen

\_\_\_\_\_ Cafeteria without stage (Clermont)      \_\_\_\_\_ Large Group Instruction (HS, Smith, Swift only)

\_\_\_\_\_ Cafeteria with stage (Swift)      \_\_\_\_\_ Lobby

\_\_\_\_\_ Classroom (Specify: \_\_\_\_\_)      \_\_\_\_\_ Locker Room (HS only)

\_\_\_\_\_ Great Hall (HS only)      \_\_\_\_\_ Field (Specify Sport: \_\_\_\_\_)

\_\_\_\_\_ Other (Specify: \_\_\_\_\_)

**3. DATE(S) & TIMES REQUESTED (Please indicate AM or PM. For more than 10 days, attach a separate sheet using 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 TECHNOLOGY SERVICES DURING THE ACTIVITY?** YES or NO

The district does not guarantee availability of technology personnel for requested time.

**11. WILL YOU NEED ANY EQUIPMENT PROVIDED OR SETUP 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.

**12. ESTIMATED NUMBER OF PARTICIPANTS 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 canceled when school is closed for inclement weather, emergency or safety conditions. School cancellations are broadcast through the local media.
3. All exterior doors **must remain locked** after school hours, and doors should **never be propped open for any reason**—including during practices, meetings, events, or building use by any group  
Group leaders, supervisors, and activity coordinators are responsible for managing entry for participants before, during, and after activities
4. A new application is requested to change information on a previously submitted application. Information on the previous application will be marked canceled on the calendar and the new application's information added. If this application is for a change, please check here\_\_\_\_\_.
5. District administration holds the right to rescind use as a result of facility misuse.
6. 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.
7. 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.
8. All requests should be submitted at least two (2) weeks prior to the intended use.
9. 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.
10. A citizen, administrator, or faculty member of the District must sign below as the party responsible for use of the facilities.
11. Organizations not affiliated with the Solanco School District must attach a certificate of liability insurance listing the organization's name as the insured party.
12. 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 or request denied.
13. Participants must park in designated parking areas only. Do not park on the grass or along the driveways.

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email Address: \_\_\_\_\_

Forward completed application and certificate of liability insurance (if applicable) to:

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

Office of the Assistant Business Manager  
Solanco School District  
Administrative Building  
121 South Hess Street  
Quarryville, PA 17566