

Hamilton County School District
Facilities and Equipment Rental Procedures and Application Package

RENTAL PROCEDURES AND INFORMATION FORM

- PROCEDURES -

The following steps **MUST** be taken by a lawful representative of the requesting organization or group in order to secure the use of District property.

- 1.** Contact the associated Site Administrator to ensure site and/or equipment availability and obtain a Facilities and Equipment Rental Procedures and Application Package. Carefully review the **Rental Procedures and Information Form (Pages 1 and 2 of this package)** before requesting the use of property and completing and submitting the application.

Site	Administrator	Phone No.
High School Facilities	Donald Harrison, Principal	386-792-8104
Elementary School Facilities	Kathy Griffin, Principal	386-792-8002
Old HS Athletic Facilities	Brandy Morgan, Fiscal Assistant	386-792-7836
Maintenance Equipment	Craig Newsome, Maintenance Supervisor	386-792-7903

- 2.** Complete the **Rental Application Form (Page 3 of this application)** and denote agreement with terms by completing and signing the bottom section.
- 3.** Complete and sign the top section of the **Rental Approval Form (Page 4 of this package)** COMPLETE THE CHECKLIST BEFORE SUBMISSION. This will expedite the process.
- 4.** Return Pages 3 and 4 of this package to the Site Administrator at least seven (7) business days before the scheduled event(s). The following items **must** be included with your submission:
 - A.** Certificate of Insurance (COI) for the event(s). Minimum coverages, guidelines, and exemptions for insurance are listed in the Information section. The organization can provide their own COI or it may purchase the required coverage through TULIP at <https://tulip.onebeaconentertainment.com/e/tulip/apply.aspx>. If purchasing through TULIP, use Venue ID Code: GNTI-AJC.
 - B.** Two (2) checks made out to Hamilton County School District. One (1) check for the damage and cleaning deposit and one (1) check for rental and personnel fees, as applicable. The rental and personnel fees check will be deposited immediately. Refunds may be issued if the event is cancelled prior to the scheduled start date and time.

The damage and cleaning deposit check will not be deposited unless there is a damage claim and/or the site was not adequately cleaned upon the end of the event(s). You may collect the deposit check after the event and after the site has been cleared or you may authorize the District to shred the check upon clearance.

- 5.** Once approved by the Superintendent, you will be notified by the Site Administrator that the application has been approved or denied. If approved, please make arrangements with the Site Administrator for access and any required personnel assistance.

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- INFORMATION -

Event Type	Damage Deposit	Cleaning Deposit	Total Deposit Check	Rental Fees (single event)	Personnel (per hour)
Classroom	\$1,000	\$25	\$1,025	\$100	Varies
Gymnasium	\$1,000	\$50	\$1,050	\$200	Varies
Cafeteria	\$1,000	\$75	\$1,075	\$250	\$25
Stadium / Athletic Fields *	\$1,000	\$50	\$1,050	\$200	Varies
Auditorium	\$1,000	\$50	\$1,050	\$200	Varies
Equipment	\$1,000	N/A	\$1,000	Varies	Varies
Other	Varies	Varies	Varies	Varies	Varies

* The District does not rent out HCHS stadium or fields.

1. **ADMISSION:** No entity charging admissions or accepting donations will be allowed to lease a facility.
2. **CLEARANCE:** Site Administrators must clear a facility before a deposit check may be returned or shredded.
3. **SUPERVISION:** Kitchens must be supervised by an approved food service employee. The use of any sound equipment or other advanced technology must be supervised by an authorized employee. The charge for supervision is \$25 per hour. For other rentals, personnel charges are at the discretion of the Site Administrator and Finance Director.
4. **FEES:** The Superintendent or his or her designee are the only individuals who may authorize a fee waiver or reduction. Typically, fee waivers or reductions can be provided for events that directly benefit students or staff.
5. **INSURANCE:** Minimum insurance coverages, amounts, and deductibles required for facilities rentals are as follows (equipment rental requires a damage deposit only):

Commercial General Liability	Each Occurrence Limit:	\$1,000,000
	Damage to Rented Premises Limit:	\$50,000
Third Party Property Damage	Limit:	\$1,000,000
	Deductible: (Damage Deposit)	\$1,000

6. **INSURANCE:** The COI must include the District as an additional insured AND specify the property, dates, times, etc. specific to the event being held (the simplest way to acquire insurance is through TULIP as instructed on Page 1). **Special Note:** Not-for-profits and governmental agencies may be exempt from part or all of the insurance requirements. This will be evaluated on a case-by-case basis. Please note that funerals, reunions, etc. may not function to earn a profit; however, they are NOT sponsored by not-for-profit agencies and would be required to fulfill all insurance requirements.

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RENTAL APPLICATION FORM

ORGANIZATION

Organization Name and Address:

Phone Number:

Email Address:

Event Type/Purpose:

Building Requested:

Area Requested:

Event Date(s):

Event Time(s):

Tax Exempt Number:

Occupational License No:

Return deposit or shred upon clearance:

- 1.** The undersigned organization and the Hamilton County School District (District) hereby acknowledge that application has been made by the organization for the use of school district facilities as described above. The District is willing to rent to the organization the use of school facilities in accordance with the terms set forth herein and school board policies.
- 2.** It is understood and agreed that no alterations to electrical systems, ancillary components, or any part of the facilities will be made, and the organization will assume any personal liability and responsibility for damages incurred. The organization shall hold harmless and indemnify the school board, its agents, servants, and employees from any and all liability and damages of every kind and sort including, but not limited to, attorney fees and other costs of responding to or defending any claims or litigation which may occur because of the use of the premises or any action or inaction of the organization, or any of its agents, servants and employees. The principal or the administrator of the participating facility shall have the final recommending authority on any rental agreement. Any additional usage of facilities beyond agreed time will have to be compensated for.
- 3.** The use of alcohol/drugs or any illegal activities on Hamilton County School District property is strictly prohibited.
- 4.** The facility must be used for the purpose as rented.
- 5.** I have received a copy of the complete **Facilities and Equipment Rental Procedures and Application Package** and understand all policies governing the use of school facilities.
- 6.** We understand the damage and cleaning deposit check will be deposited if funds are needed to cover any event-related damage(s) and/or to compensate for the cost to correct any cleaning or other deficiencies caused or created by the organization and/or event attendees.

Name of Representative

Office or Position of Representative

Signature of Representative

Date Signed

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RENTAL APPROVAL FORM

CHECKLIST (Complete the Application and Agreement Form and this checklist and submit both along with the items in the checklist to the Site Administrator.)

- ☐ Contacted Site Administrator for approval of event, location, date, and times.
- ☐ Verified there are at least seven (7) business days before the event(s).
- ☐ Reviewed Rental Procedures and Rental Information Form (Pages 1 and 2).
- ☐ Completed and attached the Rental Application Form (Page 3).
- ☐ As applicable, drafted and attached a deposit check AND a rental fees check.
- ☐ Obtained and attached a Certificate of Insurance with required coverages and amounts.

Signature of Representative

Date Signed

SITE ADMINISTRATOR

Approved: Yes _____ No _____ Date App Received: _____
Reason for Denial: _____

Damage Deposit:	Rental Fees:
Cleaning Deposit:	Personnel Costs:
Total Deposit:	Total Rental Costs:

If applicable:

Fee reduction authorized by the Superintendent: Yes _____ No _____

Justification for Deposit or Fee Reduction: _____

Site Administrator Signature

Date Signed

RISK MANAGER

Approved: Yes _____ No _____ Date App Received: _____
Reason for Denial: _____
Follow-up on Denial: _____

Risk Manager Signature

Date Signed

SUPERINTENDENT

Superintendent Signature

Date Signed