

Applicant / Permit Holder: _____ Date of Application: _____
 (Organization, Group, Individual Representing Group)

Address of Applicant: _____
 Street City Zip

Representative / Contact: _____ Cell Phone: _____ E-mail: _____

Facility Requested: _____

Support Facilities Requested: Restrooms Kitchen Parking Locker Rooms

Activity / Intended Use: _____ Estimated Attendees: _____

Equipment Needs: _____

Day Of Week	Dates of Use	Hours	Total Hours	Fees/Rates	Total
Example – M-Th	June 2-5	2	8	\$90/Hr	\$720.00
			Custodial		
			Deposit	\$500	
			Other		
			Estimated Total		

FEES: Fees are charged for scheduled use, must be paid in full at least 14 days prior to use and are not refundable. Deposits will be used to repair any damages, excessive cleaning or misuse of the facility, and use of facility beyond the dates & hours authorized. Additional custodial fees will apply if facility is not left in clean condition as determined by the District or if overtime is required.

INSURANCE: Applicant shall procure and maintain, during the life of all facility uses, General Liability Insurance that shall protect Applicant, District, its trustees, employees and agents, and the State, from all claims for bodily injury, property damage, personal injury, death, advertising injury, and medical payments arising from all facility uses under the application. Minimum coverage of \$1 Million dollars is required for Liability Property Damage & Bodily Injury, some facility use and events may require more coverage, based on the District review of the planned use. The maximum deductible allowed is \$5,000. Applicants must provide certificate of insurance on an accord form, identify coverage, language stating in particular those insured, extent of insurance, location and operation to which insurance applies, expiration date, to whom cancellation and reduction notice will be sent, and length of notice period. All endorsements, certificates and insurance policies shall state that District, its trustees, employees and agents, the State of California, are named additional insureds under all policies. Additionally certificate shall include statement that “This policy shall not be amended, canceled or modified and the coverage amounts shall not be reduced until notice has been mailed to District. Date of amendment, modification, cancellation or reduction may not be less than thirty (30) days after date of mailing notice” Upon receipt of such notice the District may cancel Applicants use. All endorsements shall waive any right to subrogation against any of the named additional insureds. The insurance requirements set forth herein shall in no way limit the Applicants liability arising out or relating to the facility use or related activities.

INDEMNIFICATION: To the furthest extent permitted by California law, Applicant shall indemnify, defend with legal counsel reasonably acceptable to the District, keep and hold harmless the District, its trustees, employees and agents, in both individual and official capacities (“Indemnitees”), against all suits, claims, damages, losses, and expenses, including but not limited to attorney’s fees, caused by, arising out of, resulting from, or incidental to, the facility use or related activities by Applicant including, without limitation, any such suit, claim, damage, loss, or expense attributable to, without limitation, bodily injury, sickness, disease, death, alleged patent violation or copyright infringement, or to injury to or destruction of tangible property (including damage to the Work itself) including the loss of use resulting therefrom, except to the extent caused by the sole negligence, active negligence, or willful misconduct of the Indemnitees, and/or to any extent that would render these provisions void or unenforceable.

LGSUHSD may engage and use adjacent facilities, including prior to and after Applicant’s use. This Applicant is solely responsible for the timely completion of this Applicants activities and events including clean up and returning the space to its condition, prior to this Applicants use.

The priority use of facilities shall remain the activities, events and use by LGSUHSD students for education and school sponsored activities, events and use. This does include changes in use schedules caused by items outside LGSUHSD control. LGSUHSD will notify Applicant as soon as a required change is discovered and will attempt to accommodate replacement facility use at another time or date.

This Applicant is solely responsible for compliance with the LGSUHSD CEQA requirements, policies and use restrictions, including completing all field or outdoor use no later than 9:00pm. Applicant certifies that all LGSUHSD property shall be managed by Applicant, protected and used only for the purpose the facility or property was intended. Applicant certifies that no LGSUHSD property, fields or buildings will be used for the commission of any unlawful act or activity which uses or promotes the use of alcoholic beverages, tobacco products, and controlled substances or be allowed in or on any District property, fields or buildings.

This Applicant agrees to comply with all LGSUHSD Policies, Regulations, and Facility Use Terms & Conditions and the Education Code of the State of California. Applicant agrees that LGSUHSD can terminate all facility use for this Applicant should any of their activities, events or related actions violate any of the LGSUHSD Policies, Regulations, and Facility Use Terms & Conditions and the Education Code of the State of California in any manner. Termination of facility use for any reason may result in rejection of future use Applications, regardless of prioritization. There are no fee refunds for termination of facility use.

Applicant’s use of any facility is limited to the duration specified in the final accepted Application and for the specific dates, times and hours defined by LGSUHSD. Additional use by Applicant without LGSUHSD approval will result in terminations of current and future use. Applicant’s failure to provide complete payment, no less than 15 days prior to initial use, shall result in termination of all planned and or schedule use for Applicant.

APPLICATION CERITIFICATION AND SIGNATURE:

The undersigned individual certifies that they are an authorized officer or agent for the designated organization, team, or group and is duly authorized to legally bind and commit the designated organization, team or group under all LGSUHSD Policies, Regulations, and Facility Use Terms & Conditions and the Education Code of the State of California for this Application and use. Further by signature below, the designated organization, team, or group has read and fully understands all LGSUHSD Policies, Regulations, and Facility Use Terms & Conditions and the Education Code of the State of California and accept them as solely Applicant responsibility without any alteration, modification or condition. This does include potential additional financial responsibility beyond fees charged for repairs due damages incurred by the Applicant’s use or related use of the LGSUHSD facilities.

Organization, Team, or Group Name: _____
Designated Representative, Office or Agent legally authorized to bind and commit organization, team, or group identified above:
Printed Name: _____
Last First Middle
Signature: _____
Dated: _____ CDL #: _____ /Copy Provided _____
Cell Phone #: _____ Email: _____

Secondary Contact Name: _____ Cell Phone #: _____

Email: _____ CDL #: _____ /Copy Provided _____