



Monroe Central School Corporation Building Use Form

1918 North County Road 1000 West - Parker City, Indiana 47368

(Please Submit Completed Forms to the Administration Office)

Contact Person Name: _____

Organization Name: _____ Status: ___ Profit ___ Non-Profit

Phone Number: _____ Email Address: _____

Event Name: _____

Date of Requested Event: _____

Time of Event: _____ Number of Participants: _____

Description of Event: _____

Facilities Requested:

___ High School Gym ___ High School Cafeteria ___ Millennium Room
___ High School Classroom ___ Elementary Gym ___ Elementary Cafeteria
___ Elementary Classroom ___ Kitchen ___ Outdoor Facility
___ Other _____

Equipment Requested:

___ Projector ___ Screen ___ Tables and Chairs
___ Podium ___ Microphone ___ Sound System
___ Other _____

Building Use Fee: \$20 per hour (additional \$20 per hour for use of kitchen facility)

Method of Payment: _____ Estimated Cost: _____

The user(s) agree to take out and maintain current throughout the term of this agreement a public risk insurance policy with a reputable insurer, and provide a copy of the Certificate of Insurance to Monroe Central School Corporation prior to the event. ___ I agree

The user(s) agree that no hazardous materials, including but not limited to, flammable materials or liquids, fireworks, pyrotechnic devices, explosives, poisonous materials or plants, strong acids or caustics, or dangerous animals will be brought onto the premises or used in any way while occupying any portion of any School owned property. ___ I agree

The user(s) agree that no amusement rides or attractions, including but not limited to, trampolines of any type, enclosed or air supported structures of any type, climbing walls, climbing ropes, firearms or shooting activity, unless prearranged with the Superintendent or Building Principal and listed below. I agree

Please list any prearranged exceptions to the above. Arrangements must be made with the Building Principal and/or Superintendent prior to completing this form.

The user(s) agree to give written notice to the School of any accident resulting in bodily injury or damage to property of the School or others occurring on School premises or in any way connected with the use of School premises within 24 hours of the accident. The notice must include details of the time, place, and circumstances of the incident, and the names and addresses of any person(s) witnessing the accident.

I agree

The school reserves the right to terminate this agreement immediately by notice in writing at its absolute discretion if any part of this agreement is contravened by the user(s) at any time. In addition, the user(s) undertakes and agrees to indemnify and hold harmless the school, school board, school board elected and appointed officials, administrators, principals, teachers and all other school employees, volunteers or representatives, and all persons and bodies corporate acting for or on behalf of them, against all liability, claims, demands, actions, suits, damages, proceedings, costs and expenses (including reasonable attorney fees) whatsoever (including injury to persons and damage to property) for which they may be or become liable directly or indirectly arising out of the use of School premises by the user(s) (or the servants, agents or invitees of the user(s)), and for such further sums in excess of those contained in any insurance policy procured by the user(s) relating to the use of the School premises or for such amounts as may not be payable under any such insurance policy.

I agree

Signature: _____ Date: _____

By signing your name you verify that all of the information is true and accurate, and you agree to abide by all rules and regulations set forth in this agreement as listed above.

Building Principal Signature: _____ Date: _____

Administration Office Signature: _____ Date: _____

Superintendent Signature: _____ Date: _____

Exempt from Payment: _____ Date of Payment: _____