

QUOGUE UNION FREE SCHOOL DISTRICT
P.O. Box 957 - 10 Edgewood Road
Quogue, NY 11959
(631) 653-4285

REQUEST FOR USE OF SCHOOL FACILITIES

Please submit to the School Office at least 14 days before the requested date for approval/disapproval of the request. Indicate your requirements regarding tables, chairs, etc., on an additional page, if necessary.

Date of Request:

Name of Organization:

Address:

Phone:

Contact Person:

Type of Organization:

Facility(s) Requested:

Intended Use of Facilities:

Dates & Times of Intended Use:

Will there be an Admission
Charge:

Yes / No

If yes, how much:

Will Food & Drinks be Served:

RESPONSE TO REQUEST FOR USE OF SCHOOL FACILITIES

Date of Request:

Name of Organization:

Request Approved: Yes / No

District Charge for Facility \$ _____

Superintendent of Schools

Date

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INDEMNIFICATION & INSURANCE REQUIREMENTS

The _____, hereafter referred to as Facility User,
(Name of Organization)

does covenant and agree to defend, indemnify and hold harmless the Quogue UFSD from and against any and all liability, loss, damages, claims or actions (including costs and attorney's fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in any way connected with the actual or proposed use of Quogue UFSD property, facilities and/or services, including but not limited to bodily injury to any employee, invitee, guest, spectator, contractor or subcontractor of Facility User.

Facility User understands and agrees that its use of Quogue UFSD property and facilities includes, but is not limited to, all areas identified in the application and/or permit, and sidewalks, walkways, parking lots, entrances, stairs, and all other areas incidental to and/or connected with the use of the premises (hereinafter referred to as "incidental areas"). Facility User agrees that its indemnity and insurance obligations extend to the areas identified in the application and/or permit and any and all incidental areas.

Insurance requirements are provided in the NYSIR Sample Insurance Requirements – Use of Facilities. The Quogue UFSD must be listed as additional insured, and the Facility User must provide, at a minimum, the minimum required insurances based on the type of organization as noted in the NYSIR Sample Insurance Requirements - Use of Facilities document.

ACKNOWLEDGEMENT

Please sign the following statement and return this form to the School Office.

The _____ agrees to the charges listed,
(Name of Organization)

above, to provide required insurance documents, acknowledges and agrees to indemnification terms, and understands that approval for the use of facilities may be rescinded by the Quogue Union Free School District at any time.

Signature of Organization Official

Title of Organization Official