

City of St. Charles School District  
400 North Sixth Street  
St. Charles, MO 63301

## FACILITIES USE APPLICATION

(Minimum 2 week notice required)

The City of St. Charles School District will follow the current health protocols that are in place, approved by the Board of Education. Masks are not required and are optional.

Before filling out this application, please read the Rules and Regulations on our District website under board policy KG and KG-R and then complete the form below and our health protocol as listed above.

Charge for this Facility: \$ \_\_\_\_\_ Charge for Custodian \$ \_\_\_\_\_

Today's Date: \_\_\_\_\_ Profit \_\_\_\_\_ Non-Profit \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Facility you are requesting: \_\_\_\_\_

Location in facility that you will be using: \_\_\_\_\_ # People attending \_\_\_\_\_

Equipment requested: # Tables \_\_\_\_\_ # Chairs \_\_\_\_\_ Podium \_\_\_\_\_ Microphone \_\_\_\_\_ List other \_\_\_\_\_

For Auditorium use/circle please: **Lighting** **Spotlights** **Sound** **Risers** **Projector Screen**

Purpose for which the above facility is to be used: \_\_\_\_\_

Date(s) of event: \_\_\_\_\_

Time beginning (include set-up): \_\_\_\_\_ Time ending (include clean-up): \_\_\_\_\_

Name of person(s) in charge of this event: \_\_\_\_\_

This application is made with full understanding of the General Regulations on Building Usage which are found on our District Website as stated above. The user agrees to defend and hold the City of St. Charles School District, it's officers, agents and employees harmless from every claim, demand, loss, damage, liability and expense relating to any actual or alleged injury to any person or actual or alleged loss or damage to property caused by or resulting from any occurrence on the school premises in connection with use of this facility, except those caused by the gross negligence or willful misconduct of agents and employees of the City of St. Charles School District. The applicant personally guarantees the payment of fees, miscellaneous charges or damages that may be assessed during the period the facility is in use based on the date and time indicated.

\*Certificate of Insurance required for all events (with City of St. Charles School District named as Certificate Holder).

**By signing this application, you have read and agree to abide by the school policy and all applicable fees.**

\_\_\_\_\_  
Applicant's Name (Print)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Contact phone numbers

\_\_\_\_\_  
Address City State Zip code

\_\_\_\_\_  
Approved: Principal

\_\_\_\_\_  
Approved: Business Office

03/01/2023 kg