**Facility requested:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Pittsfield Middle High School |  | Pittsfield Elementary School |  | **Drake’s Field** |
|  |  | 23 Oneida Street |  | 34 Bow Street |  | **7 Barnstead Road** |
|  |  | Pittsfield, NH 03263 |  | Pittsfield, NH 03263 |  | **Pittsfield, NH 03263** |
|  |  | Tel. 603-435-6701 |  | Tel. 603-435-8432 |  | Tel. 603-435-6701 |
|  |  | Fax 603-435-7087 |  | Fax 603-435-7358 |  | Fax 603-435-7087 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Please select (√) one:** | | |  |  | | |
| **Cafeteria** | **Gymnasium** | **Lecture Hall (PMHS only)** | **Library/Media Center** | | **Other** |  |
|  |  |  |  | |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sponsoring organization: |  | | | |
| Organization representative: |  | | | |
| Daytime telephone: |  | Email address: |  | |
| Requested date(s): |  | Start/End time of event | |  |

**Start/End Time**

**of Facility Use \_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Describe function:** |  |

**It is required that there be a trained Event Manager for up to 250 persons in attendance and every 250 persons there after.**

**Event Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Event Manager Training \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Will there be more than 250 people in attendance? Yes or No (circle one)**

**If yes, provide the name of an additional Event Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Event Manager Training:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CPR/First Aid Certified\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Expiration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Certification on file at SAU (circle one) YES NO**

|  |  |
| --- | --- |
| **Special equipment requests (PA system, tables, etc.):** |  |

**Events scheduled during the school year should start and end during non-school hours when custodians are on duty. Priority use will be given to school sponsored organizations. The athletic facilities (gym) cannot be scheduled for use during school sponsored athletic contests or team practices.**

**As the representative of the above organization, I agree that all persons in attendance at the above proposed function will abide by the rules, policies and laws governing the use of public school facilities. State law and Pittsfield School Board Policy prohibit the use or possession of controlled substances (alcohol, tobacco products, and illegal drugs) within the school building or on school grounds.**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **Signature/Organization Representative** | **Address** | **Date** |

**All applications should be forwarded to the main office at least 14 days in advance of the scheduled event.**

**OFFICE USE ONLY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Admin. Assistant:** | **Approved** | **Denied** | **Reason** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Athletic Director (HS Gym or Drake Field):** | **Approved** | **Denied** | **Reason** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Signature:** |  | | | | | | | **Date:** |  | | |
| **Space charges** | | **$** |  | **Service charges** | **$** |  | **Total charges** | | | **$** |  |

|  |  |
| --- | --- |
| **Special considerations:** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dean of Operations:** | **Approved** |  | **Denied** |  | **Reason** |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Signature:** |  | | | | | **Date:** |  | | |
|  | |  |  |  |  | | |  |  |
|  | | **Facility Usage Calendar of Events** | |  |  | | |  |  |

**CONTRACT FOR THE USE OF SCHOOL FACILITIES**

|  |  |
| --- | --- |
| **Date:** |  |

**It is agreed that the Pittsfield School Board, Pittsfield, New Hampshire, contracts for the use of the school facilities as follows:**

|  |  |
| --- | --- |
| **Sponsoring organization:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Person responsible:** |  | **Phone #:** |  |

|  |  |
| --- | --- |
| **Purpose of use:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of event:** |  | **Time of event:** |  |

|  |  |
| --- | --- |
| **Facilities to be used:** |  |

|  |  |
| --- | --- |
| **Equipment to be used:** |  |

**The sponsoring organization agrees to abide by the attached regulations governing the use of school facilities and any additional rules provided, in writing, by the school administration.**

**SCHEDULE OF FEES:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Space** | **(√)** |  | |
| **$25.00** |  | **Basic charge for gym, cafeteria, lecture hall, media center** | |
| **$50.00** |  | **Kitchen rate** | |
|  |  |  | |
| **Services** | **(√)** |  | |
| **$25.00** |  | **Custodial charge per hour (minimum charge for 2 hours = $50)** | |
| **$25.00** |  | **Kitchen staff person per hour (minimum charge for 2 hours = $50)** | |
| **$\_\_\_\_\_\_** |  | **Other** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Approved by:** |  |  |  |
|  | **Administrator’s Signature** |  | **Date** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Rental fees to be paid in advance $** | |  | **.** | **Please make check payable to Pittsfield School District.** | | | |
|  | | | | | | |
| **Organization** | | | | |  | **Representative** |
| **Address:** |  | | | | | |

**COMMUNITY USE OF SCHOOL FACILITIES – REGULATIONS**

1. **In the event of a conflict, non-profit organizations of Pittsfield will be given first priority.**
2. **The program must be either educational in nature and/or beneficial to the general public.**
3. **If police service is required, the sponsoring organization must furnish police detail at its own expense.**
4. **If required, the sponsoring organization will provide a trained event manager for every 250 persons in attendance. Event manager must complete training on an annual basis and provide the date of training completion.**
5. **If custodial service is required, the sponsoring organization will reimburse the District the cost thereof.**
6. **The sponsoring organization must apply for use at least fourteen (14) days in advance.**
7. **The sponsoring organization must make all arrangements with the school administration, acting as the representative of the School Board, and the sponsoring organization must sign a contractual agreement.**
8. **The sponsoring organization agrees to pay for the use of equipment.**
9. **The sponsoring organization agrees to pay the cost of damage to the facilities and equipment other than damage caused by normal wear.**
10. **An adult designated by school administration, shall be present during the event contracted for and shall be in complete charge.**
11. **The School Board reserves the right to take exception to any of these rules when, in its opinion, it is in the best interest of the District.**
12. **Schedule of Fees**

**A. Basic charge for gym or cafeteria $25.00**

**B. Custodial/Kitchen staff charge per hour $25.00 (2 hour minimum charge = $50)**

1. **The kitchen facility of the cafeteria is not available for use by outside groups except by special permission of the school administration and food service manager; use must include at least one district food service employee.**
2. **Requests for the use of Drake Field must be submitted in writing to the School Board through the Business Administrator of SAU #51. To be considered and approved, a request must provide the board with reasonable assurance that the field will not be damaged, adequate liability insurance is provided, clean-up measures are assured, and that the event will not conflict with previously scheduled events.**
3. **No person or group using Pittsfield School District Facilities will allow the presence or use of alcohol, tobacco or any illegal substance on school property.**