

**ITHACA CITY SCHOOL DISTRICT
APPLICATION FOR USE OF SCHOOL DISTRICT PROPERTY**

PAYMENT AND PROOF OF INSURANCE ARE REQUIRED PRIOR TO APPROVAL OF USE OF FACILITIES

The members of Brain Team
Request that permission be granted for the use of 6-102

In accordance with the rules and regulations of the Ithaca City School District for the following purpose:

Brain team recruitment into session

(If requesting the use of **Kulp Auditorium** you **MUST** fill out the technical needs form before your application will be approved.)

Contact Person: Benjamin Kirk
Phone #: 607-274-2191 Email: bkirk@icsd.k12.ny.us

ALL BUILDINGS WILL BE LOCKED BEFORE AND AFTER THE REQUESTED START AND END TIMES.
PLEASE ALLOW YOURSELF ENOUGH TIME TO SET UP AND CLEAN UP THE SPACE AND REMOVE PERSONAL PROPERTY.

Date/s Requested: 10/9

Time requested: Start 3:45 End: 4:45

Time of event: Start: 3:45 End: 4:45

Estimated Number of Attendees: 10

Will you require custodial staff? YES / NO

Please list any furniture you will need. Be specific and give diagrams for all set ups.

Will you require additional personnel services? YES / NO If yes, please describe: _____

INSURANCE: PROPERTY AND LIABILITY INSURANCE WILL BE REQUIRED IN AMOUNT OF \$100,000 PROPERTY AND \$1,000,000 BODILY INJURY AND PERSONAL LIABILITY. Such coverage must be evidenced by a **CERTIFICATE OF INSURANCE TO BE PRESENTED WITH THIS APPLICATION. The Ithaca City School District must be named as the Certificate Holder as well as an additional insured (under description of Operations). Use of school property by non-school groups for meetings and performances is limited by the laws of New York State and the regulations of the Ithaca City School District Board of Education of Ithaca, New York. See policy on reverse.**

[Signature]
Signature of Applicant

10/2
Date

FOR OFFICE USE

Received By _____
Principal _____
Head Custodian _____
Director of Activities _____
Kulp Manager _____
Director of Athletics _____
Director of Food Services _____
Library Chairperson _____

Processing Fee: \$10
Building Fee: \$25/hour x _____ = \$ _____
Custodial Fee: \$20/hour x _____ = \$ _____
Trash Processing Fee: \$35
Kulp Fee: \$45/hour x _____ = \$ _____
TOTAL COST: \$ _____
Payment Received _____
Certificate of Insurance Received _____