

NORTH ANDOVER PUBLIC SCHOOLS

APPLICANT

Name of Organization _____ Requestor Name _____

Address _____

Telephone _____

Purpose of Meeting _____

School : _____ Facility _____

Date/s and Time/s (Please be as specific as possible)

First Choice: _____

Second Choice : _____

Estimated Number of Attendees _____ Admission Charged: Yes _____ No _____

Equipment Required: _____

Approval of this application is subject to the Policy and the Rules and Regulations governing the use of Public School facilities as adopted by the North Andover School Committee. Any outside group/organization (non-school) which cancels a function without notice will be billed for the services of a custodian (minimum of two hours).

I hereby apply for the use of the above in accordance with established guidelines for community use of school facilities and have authorization from this group/organization to serve as its representative.

Signature of Authorized Representative

PLEASE SIGN REVERSE SIDE

FOR OFFICE USE ONLY

FEE SCHEDULE

Approved _____ Disapproved _____

Rental Fee \$ _____ x _____ = \$ _____

_____ x _____ = \$ _____

Equipment Rental

Required – see attachment

Utilities Surcharge _____ = \$ _____

Other Charges _____ = \$ _____

TOTAL AMOUNT DUE = \$ _____

AMOUNT OF DEPOSIT REQUIRED = \$ _____

ABOVE PAYABLE TO "Town of North Andover"

STAFF REQUIREMENTS/LABOR CHARGES

Custodian/s required # _____ at \$ _____ an hour.

Kindly make check payable to NORTH ANDOVER PUBLIC SCHOOLS and give to custodian on day of event.

Organization will be billed for services of a custodian/s.

School Department will pay for custodial services.

Cafeteria worker/s required # _____ at \$ _____ per hour, per worker.

Organization will be billed for cafeteria services.

Site Approval: _____ Date copies sent out: _____

NOTE: 2-hour minimum charge for custodial services if request is for "RAIN DATE" use.

Date _____
02/08

By _____
For the North Andover School Committee

NORTH ANDOVER PUBLIC SCHOOLS

ADDITIONAL SERVICES (IF REQUIRED)

- A. Equipment Rental -- if required, check here _____ and see below for instructions.
- B. You must provide _____ police officers for this function. Police Certificate required for any occasion to which the public is invited. I hereby certify that arrangements have been made for the presence of an uniformed policeman at this function.

Signature and Title, North Andover Police Department

- C. Fire Department Certificate required for any occasions when stage props and scenery will be used. I hereby certify that all scenery and equipment has been approved for use by the above listed organization for this function.

Signature and Title, North Andover Fire Department

TOBACCO USE

Effective from the date of this policy, smoking, chewing, or other use of tobacco products by staff, students, and members of the public shall be banned from all district buildings and district property. In addition, tobacco use in any form is prohibited on school buses and at all school-sponsored events, even though the event does not take place on school grounds.

I have applied for use of school facilities. I understand the above policy and agree to abide by its restrictions. I understand that the use of tobacco by all members of the public will be prohibited.

Signed

Date

Name of Organization

EQUIPMENT RENTAL STATEMENT

The North Andover Public Schools prohibits all applicants from providing their own theatrical and stage lighting equipment. Our Space and Equipment Rental Policy – Performing Arts (Appendix R) outlines general items which are included in the basic rental fee. However, a limited inventory of school owned theatrical and stage lighting equipment, per Appendix R, is available for a rental fee.

The School Department also requires the applicant to hire a sufficient number of our own auditorium technicians if the applicant rents any specialized equipment or services, e.g., dimming control rack, rigging, technical assistance, etc. Please refer to Appendix R for more details.

RELEASE

For valuable consideration, I _____ hereby, on behalf of
(authorized representative)
myself, my heirs, my children or entity named herein _____
(entity or individual)
release and forever discharge the Town of North Andover, its committees, boards, officials, employees, and agents
from all claims, actions and injuries of any kind whatsoever, arising from or related to, the use of
_____.

Date

Signed