

WOODLAND JOINT UNIFIED SCHOOL DISTRICT
435 Sixth Street, Woodland, CA 95695

REQUEST FOR USE OF SCHOOL FACILITIES

- Organization _____
- Person in Charge _____ Phone _____ FAX _____
- Address _____ City/Zip _____
- Alternate Person In Charge _____ Phone _____
- Approximate Number Involved: Students _____ Adults _____
- (a) For a single meeting (to include time for preparation and clean-up):
Date _____ Time: From _____ to _____
- (b) For a series of meetings to include time for preparation and clean-up:
Starting Date _____ Ending Date _____
Days of Week _____ Time: From _____ to _____
- School Desired _____
- Type of Facility Requested _____
- Equipment Authorized _____
- Nature/Purpose of Activity or Meeting _____
- An admission charge or collection (will) or (will not) be made. Organization is (Profit) (Non Profit)
- Proof of Insurance Must Be Provided. Minimum \$1,000,000 public liability & property coverage. Some uses may require additional coverage.

The undersigned agrees that the attached rules and regulations will be complied with in full. The undersigned, who is to be in charge of the activity, is twenty-one years or age or over. I agree that I am responsible to the school district for the use and care of school property. I further agree that the nature of the activity will conform with that stated in the application. I agree to indemnify and hold harmless the Woodland Joint Unified School District, its officers, agents, and employees against any and all loss, damage, and/or liability that may be suffered or incurred by the school districts, its officers, agents, and employees, and against any and all claims, demands, and causes of action that may be made or brought against the school districts, its officers, agents and employees, caused by, arising out of, or in any way connected with the use by the undersigned of the Woodland Joint Unified School District facility or the exercise of the privilege herein granted. I agree that the school property for which the application is hereby made will not be used for the commission of any act intended to further any program or movement the purposes of which is to accomplish the overthrow of the government of the United States by force, violence or other unlawful means. The above stated organization does not, to the best of my knowledge, advocate the overthrow of the government of the United States or the State of California by force, violence or other unlawful means, and that, to the best of my knowledge, it is not a Communist action organization or Communist front organization required by law to be registered with the Attorney General of the United States. This statement is made under the penalties of perjury.

• _____
Authorized Group Representative Position or office Date Prepared

Site Approval _____ Date: _____
(Site Principal)

| | | | |
|--------------------------|-----------------|-----------------|--------------------|
| Office Use Only | | | |
| Custodial Hours _____ | Charge _____ | No Charge _____ | Fee Approval _____ |
| Insurance Provided _____ | Comments: _____ | | |
| | | | Site _____ |

Please be prepared to show your approved copy of use form at time of use if asked.