

**POTTSTOWN SCHOOL DISTRICT**  
**230 BEECH STREET, POTTSTOWN, PA 19464**  
**Phone: 610-970-6611 • Fax: 610-326-6540 • Email: [facilities@pottstownk12.org](mailto:facilities@pottstownk12.org)**

**APPLICATION FOR USE OF SCHOOL FACILITIES**

*Please complete this form, be as detailed as possible and return to the attention of the Business Administrator*

Date of Application\_\_\_\_\_

Name of Organization or Individual\_\_\_\_\_

Applicant's Name\_\_\_\_\_

Address of Applicant or Billing Address\_\_\_\_\_

Home Phone\_\_\_\_\_ Work Phone\_\_\_\_\_ Cell Phone\_\_\_\_\_

Email Address\_\_\_\_\_

Building Requested\_\_\_\_\_ Room(s) Requested\_\_\_\_\_

Date(s) of Event\_\_\_\_\_

Set-Up Time\_\_\_\_\_ Break-Down Time\_\_\_\_\_ Beginning Time of Event\_\_\_\_\_ Ending Time of Event\_\_\_\_\_

Type of Event\_\_\_\_\_ How many will attend the event?\_\_\_\_\_

Describe the event\_\_\_\_\_

Will admission be charged? Yes\_\_\_\_\_ Cost\_\_\_\_\_ No\_\_\_\_\_

Check the equipment to be provided by Pottstown School District:

\_\_\_\_\_ PA System \_\_\_\_\_ AV Equipment \_\_\_\_\_ Tables How Many?

\_\_\_\_\_ Microphone \_\_\_\_\_ Athletic Equipment \_\_\_\_\_ Chairs How Many?

\_\_\_\_\_ Stage Lighting \_\_\_\_\_ Scoreboard

**Please describe the setup of chairs & tables and any other detailed requests \_\_\_\_\_**

**ARTICLE 1 INDEMNIFICATION**

Applicant agrees, upon demand, to indemnify, defend, release, and hold harmless the District and its board members, directors, employees, agents, and servants, from and against any and all losses, claims, demands, actions, causes of action, suits, judgments, injuries, liabilities, expenses, including reasonable legal fees and court costs, asserted by any individual or entity arising (i) as a result of this Agreement/ Rental; and/or (ii) as a result of a breach by Applicant of any of the terms or conditions of this Agreement.

Applicant agrees to indemnify, defend (upon demand) and save the District and its directors, officers, employees, and agents (collectively, the "District Indemnitees") harmless from any liability; losses; damages; judgments; liens; expenses and costs, including, but not limited to reasonable legal fees and costs; and loss of subsidy or grants sustained or incurred in connection with any claims, suits, actions or proceedings made or brought against any District Indemnitee(s) as a result of any negligent acts or omissions of Applicant, officers, employees and/or agents in the performance of Applicants obligations under this Agreement. It is intended that this indemnity, defense, and hold harmless provision be given its broadest possible meaning and that District Indemnitees and their insurers are expressly considered to be third-party beneficiaries with respect to this statement.

Signature of Applicant (Organization Official)\_\_\_\_\_

By signing this application, the person whose signature appears below signifies that he or she is responsible for the group, will see that the buildings are not misused, that groups have proper adult supervision, and that the buildings and grounds are used in conformity with the rules and regulations of the board of education. It is also hereby understood that school activities have priority for the use of the buildings and facilities.

**TO BE COMPLETED BY THE BUSINESS OFFICE**

**Hourly Rates:**

☐ Cafeteria Worker - \$30per hour    ☐ Custodian - \$40per hour    ☐ Ground Crew - \$45per hour    ☐ Maintenance - \$55per hour

☐ Security required (to be billed by Pottstown Police Department)

☐ Stage Crew required (to be billed by Stage Manager)

☐ Enter FS Direct\_\_\_\_\_

Building Approval \_\_\_\_\_

*Principal*

\_\_\_\_\_

Date

Administration Approval \_\_\_\_\_

*Business Administrator*

\_\_\_\_\_

Date

O:Application Use of Facilities