

**RIVERVIEW SCHOOL DISTRICT Elementary Facility Use Rental Agreement**

NO. \_\_\_\_\_

**Due before application is processed:**

- \$15.00 Processing Fee
- Required Certificate of Insurance, written with limits of \$500,000 Combined Single Limits, per occurrence, naming Riverview School District as an additional insured:

Location Requested: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Organization: \_\_\_\_\_ Group Type: \_\_\_\_\_

Person in Charge: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Purpose of Request: \_\_\_\_\_

Date(s) Needed: \_\_\_\_\_

Time(s) Needed: Start: \_\_\_\_\_ End: \_\_\_\_\_

Classroom(s) # needed \_\_\_\_\_

Conference Room \_\_\_\_\_

Library \_\_\_\_\_

Multi-purpose Room \_\_\_\_\_

Computer Lab (Technician required) \_\_\_\_\_

Gym \_\_\_\_\_

Kitchen-Service Only \_\_\_\_\_

Kitchen/Equipment-supervision required \_\_\_\_\_

Outside Water Use \_\_\_\_\_

Audio-Visual Equipment \_\_\_\_\_

Tables \_\_\_\_\_

Other Equipment \_\_\_\_\_

Fields \_\_\_\_\_

Custodian \* \_\_\_\_\_

**\*If set-up is required during the regular custodian work day a minimum of 30 minutes will be charged. On non-work days there will be a 30 minute before and after event charge for custodians to open and close the facility.**

Admin. Approval \_\_\_\_\_ Date: \_\_\_\_\_

Dist. Approval \_\_\_\_\_ Date: \_\_\_\_\_

<p>Office Use Only:</p> <p>Amount due: _____</p>
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