“CHECKLIST”

LAFOURCHE PARISH SCHOOL BOARD
“USE OF FACILITIES REQUEST PACKET”

Your completed request packet must be submitted to the *Safety Department, located @ 701 East 7th Street, Thibodaux, LA, 70301*. Additionally, the completed request packet **must be submitted 30 DAYS PRIOR TO THE EVENT**, or the event will be **DENIED!**

The following checklist must be completed (Requestor to initial each blank) along with the attachments before the packet is submitted to the Principal for signature. The packet with attachments is then forwarded to the Safety Department for Insurance approval and collection of fees and lastly to the Superintendent for final review and approval.

___ A-110E (Request to School/Principal)
___ A-110F (Contract between LPSB and Requestor)
___ A-110G (Release and Indemnity Agreement) **MUST BE NOTARIZED PRIOR TO SUBMISSION**.
___ A-110H (Release of claims)
___ A-110I (Insurance requirements) Requestor must attach COI & submit full Electronic Copy **per Type 4**

*Note: The payment of custodians for service provided during the event is the responsibility of the organization. Custodians will be compensated at a rate of (1½) times their hourly rate of pay. The school will submit a timesheet indicating the name of the custodian, and hours worked to the Payroll Department to compensate custodians for time worked. LPSB will invoice the organization for custodial costs. Any organization failing to adhere to the policy and provide payment of custodians in a timely manner shall forfeit the use of school facilities now and in the future.

THE REQUEST A-110E

Organization:_____ School Location:_____.
Date of Request:_____ Activity:_____.
Sponsor if Applicable:_____ Approximate Attendance:_____.

Date(s) to be used:
_____/_____/ 20_____
_____/_____/ 20_____
_____/_____/ 20_____
_____/_____/ 20_____

Time:
___:_____am/pm to ___:_____am/pm
___:_____am/pm to ___:_____am/pm
___:_____am/pm to ___:_____am/pm
___:_____am/pm to ___:_____am/pm

Total Hours to Be Used:_____ Total Amount due:_____.
(Total dollar amount due prior to the event = days to be used x's fee per day)

Requested facility (Print facility in blank):_____.

FEE SCHEDULE:

1. Auditorium ($600.00 fee per day)
2. Gymnasium ($600.00 fee per day)
3. Rehearsal, up to 4 hours - Auditorium/Gymnasium ($200.00 fee per day)
4. Classroom ($20.00 fee per day)
5. Cafetorium ($200.00 fee per day)
6. Athletic Field- Baseball/Softball/Tennis ($200.00 fee per day)
7. Turf Football/Soccer Field ($1,500.00 fee per day)
8. Turf Football/Soccer Field - Practice ($300.00 fee per day)
9. Other Area: _____

PROVISIONS:

1. The user of the facilities shall assume full responsibility and agree to pay costs for any damage sustained. Also, the user shall sign a release and indemnity agreement along with the use of school facilities request.
2. Smoking is not allowed. Alcohol is strictly prohibited.
3. Only the room(s) or designated areas in the original request shall be used.
4. The room(s) or areas used shall be left in a clean and orderly condition.
5. An inspection of the facility shall be made with a representative from the school before and after activity to determine any damage that may have occurred.
6. Provide adequate security as determined by the school administration.
7. Ticket sales and/or attendance shall be limited to the normal seating capacity of the facility used.

In the blanks below, you must print neatly. Lack of legibility, may cause a longer review process.

_____ _____ _____
RESPONSIBLE PARTY/(REQUESTOR) PHONE NUMBER EMAIL ADDRESS

APPROVED: _____ _____
PRINCIPAL DATE

APPROVED: _____ _____
SAFETY MANAGER DATE

Contract between LPSB and Requestor A-110F

Facility being requested:_____ Total Amount due:_____.

This agreement made and entered into on the _____ day of _____, 20_____, by and between _____ and Lafourche Parish School Board.
(Organization)

Terms of the Contract:

1. The user of the facilities shall assume full responsibility and agree to pay a $300 damage deposit. The user also agrees to pay for any damages incurred in excess of the $300 deposit.
2. Payment of the damage deposit shall be made by a separate check payable to the Lafourche Parish School Board, NO CASH will be accepted.
3. Smoking is not allowed. Alcohol is strictly prohibited.
4. Only the room(s) or designated areas in the original request shall be used.
5. The room(s) or areas used shall be left in a clean and orderly condition.
6. An inspection of the facility shall be made with a representative from the school before and after the activity to determine any damage that may have occurred.
7. Provide adequate security as determined by the school administration.
8. Ticket sales and/or attendance shall be limited to the normal seating capacity of the facility used.
9. The user shall sign a release and indemnity agreement prior to the use of the facility and shall provide the insurance required in the attached schedule.
10. The use of the facility shall not be allowed without a custodian(s) or staff member(s) present. Compensation for custodians shall be at a rate equivalent to one and one-half times the regular hourly wage and payment for hours worked shall be made to the Lafourche Parish School Board. The administration shall determine the adequate number of custodians needed, and will submit time sheets with custodians name and hours served to the Payroll Department for compensation of time served.
11. Fees for use of the facility shall be assessed according to the “use of facility fee schedule,” and payment made to the Lafourche Parish School Board prior to the use of the facility.

It is mutually agreed that the violation of any part of this agreement will result in the forfeiture of the deposit and the right to continue use of the facility. The undersigned further acknowledges that he/she has inspected the premises to be used and confirms that there are no apparent defects or conditions which could pose a safety concern to the participant’s or invitees pursuant to this agreement. USER’s SIGNATURE _____

If all terms of the agreement are in compliance, the deposit will be refunded to the user after completion of the event.

In witness whereof the parties hereto have executed this agreement on the day and date first written above the duplicate originals, to be deemed an original contract.

_____
SIGNATURE OF REQUESTOR

_____
SIGNATURE OF PRINCIPAL

_____
WITNESS SIGNATURE 1

_____
SIGNATURE OF SAFETY MANAGER

_____
WITNESS SIGNATURE 2

_____
SIGNATURE OF SUPERINTENDENT

RELEASE AND INDEMNITY AGREEMENT A-110G

KNOW ALL MEN BY THESE PRESENTS that I _____, for and on behalf of _____, (hereinafter referred to as **INDEMNITOR**).

FOR AND IN CONSIDERATION of the use of the premises (including, by way of illustration, parking areas, buildings, elevators, stairways, stadium, meeting rooms, and/or gymnasium) on the campus of _____, located in _____, Louisiana on or about the _____ day of _____, 20_____.

INDEMNITOR DOES HEREBY Release, Remise, Discharge, and Forever Acquit the **LAFOURCHE PARISH SCHOOL BOARD** and its agents, employees, servants, and representatives including, but not limited to, the individual school board members, the Superintendent of Schools, the principals, assistant principals, teachers and school personnel (hereinafter referred to as Indemnitee) who are connected or in any way involved with said school facilities or the use thereof, from

ANY AND ALL LIABILITY or fault of any kind or nature whatsoever, arising out of or in any way connected with said use of school facilities, even if caused by the fault or negligence of **INDEMNITEE**.

INDEMNITOR further agrees to **HOLD HARMLESS AND INDEMNIFY** the **INDEMNITEE** from any and all claims, suits, costs or expenses of any kind of nature, including, but not limited to, settlement amounts, or in any way connected with any accidents, occurrences, or other incidents which happen during or associated with the use of the school facilities by **INDEMNITOR** or any of its agents, servants, employees, or other representatives, even if such accidents, occurrences, or other incidents arise out of the fault of negligence of **INDEMNITEE**.

In witness whereof, I have hereunto set my hand and seal this _____ day of _____, 20_____, and hereby warrant that I have been duly authorized to do so on behalf of the aforementioned organization.

_____
ORGANIZATION

_____
WITNESS SIGNATURE

_____
REQUESTOR

_____
NOTARY

Lafourche Parish School Board A-110H

RELEASE OF CLAIMS

On this _____ day of _____, 20___, I, _____, acknowledge that I agree to participate in the following Activity:

" Brief statement of what they will be doing "

in furtherance of the (the "activity")

at the _____, owned by the Lafourche Parish School Board.

I hereby release the Lafourche Parish School Board and hold it harmless from any liability as a result of any injury or harm to me resulting from my participation in the described Activity. I acknowledge that:

SELECT OPTION (A) OR (B):

(A) _____ I am not an employee of the Lafourche Parish School Board and release any claims I may possess against the Lafourche Parish School Board under Louisiana Workers Compensation laws.

(B) _____ While I am an employee of Lafourche Parish School Board, for purposes of this event, I am acting voluntarily and in my capacity as a parent/guardian, not in the course and scope of my employment with the Lafourche Parish School Board, and release any claims I may possess against Lafourche Parish School Board under Louisiana Workers Compensation laws.

I acknowledge and assume all risks associated with my participation in the Activity and I acknowledge that the possibility of injury to my person does exist as a result of my participation considering the nature and scope of the Activity.

Finally, I acknowledge that any injury or accident which I may cause shall not be imputed to the Lafourche Parish School Board. Injury caused to me by a fellow participant shall not be imputed to the Lafourche Parish School Board under any theory of law.

I confirm I am at least 18 years of age, have read the above, and fully and freely sign this Release.

_____ _____

Witness Signature **Participant Signature**

_____

Participant Print Name

LAFOURCHE PARISH SCHOOL BOARD - SAFETY DEPARTMENT

Insurance Requirements of Contractors, Vendors, Tenants; as Required on 2.01.24

TYPE 4: VENDOR GROUP USE OF FACILITIES

Board-owned Lands, Lease of board buildings, office space, Use of Facilities, and E-Commerce vendors who don't install or visit LPSB except NO software or apps.

Note: Vendor must furnish "e" copy of insurance policies required.

				TYPE 4
	POLICY FEATURES, MINIMUM LIMITS OF LIABILITY REQUIRED:			
1)	**Commercial**	BI-PD Per Occurrence:	**1,000,000**	**Yes**
	General Liability	BI-PD Annual Aggregate:	**2,000,000**	**Yes**
a)	Damage to rented property - at least $50,000			**Yes**
b)	Contractual Liability for indemnity, defense		Incl in 1 above	**Yes**
2)	**Additional Insured, to apply in favor of:**			**Yes**
	Lafourche Parish School Board, its officers & employees			
	Attn: Safety Dept.			
	805 E. 7th Street, Thibodaux, LA 70301			
	Required for: **CGL**			
	Benefits to LSPB shall apply as **Primary and Non-Contributory**			
3)	**Waiver of Subrogation, to apply in favor of:**			**Yes**
	Lafourche Parish School Board, its officers & employees			
	Attn: Safety Dept.			
	805 E. 7th Street, Thibodaux, LA 70301			
	Required for: **CGL**			