

MOULTONBOROUGH COMMUNITY AUDITORIUM USE FORM

Person Completing Form: _____ Today's Date: _____

Address: _____ Phone #: _____

Individual Organization Requesting (LESSEE) _____

Day and Date(s) Requested: _____

Time Requested (Set Up etc.,) From _____ To _____

Performance Time: From _____ To _____ Custodian Needed: _____ Yes _____ No

Description of Activity: _____

Contact E-mail Address: _____

Specific areas needed such as stage, green room, lobby:

Equipment needed such as piano, risers, lighting, sound, podium, screen, etc.

Guest Internet Access: ____ YES ____ NO How many people need access? _____

(District Staff/Students already have access)

Are you requesting food or drink in the lobby or green room? Yes ____ No ____

Explain your request: _____

Number of participants: _____ Estimated Audience Size: _____

Adult Supervisors: List below all individuals taking on the responsibility of being an adult supervisor or chaperone:

Signature below indicates individual has received a copy of the school board policies Kf and KF-R

Name of Insurance Company: _____

(Note: The addendum on the other side of this application form must be signed.)

OFFICE USE ONLY:

Dates checked and tentatively reserved: _____

Office Staff Signature

Auditorium Technician's Estimated Hours: _____

Auditorium Technician's Availability: yes: _____ No: _____

Auditorium Director's Signature: _____ Date: _____

Administrator's Approval: _____ Date: _____

Date Certificate of Insurance Received on File: _____

Approved Copy Sent To:

____ Facilities Mgr ____ Audi. Tech ____ Audi. Dir ____ Arts Dept. Chair ____ Main Office ____ IT ____ IT

ADDENDUM TO APPLICATION FOR USE OF FACILITIES

The Addendum becomes part of any Facilities Use Application by and between the ACTIVITY SPONSOR (LESSEE) and the Moultonborough School District (LESSOR).
LESSEE _____

A. INDEMNIFICATION:

IT IS AGREED that in consideration for allowing the rental or use of the LESSOR'S owned facilities and in full recognition of its fiduciary responsibility to protect publicly owned property and assets, the LESSEE hereby covenants and agrees at all times to indemnify and hold harmless the LESSOR, its officers and employees, to the fullest extent permitted by law, from any and all claims, damages, losses and expenses, including, but not limited to, reasonable attorney's fees and legal costs, arising out of the use of these rental premises and all facilities by the LESSEE, its officers, employees, agents, representatives, contractors, customers, guests and invitees.

The LESSEE will provide a Certificate of Insurance reflecting Commercial General Liability coverage with limits of no less than \$1 million per occurrence naming the LESSOR as an Additional Insured.

B. INSURANCE:

As evidence of its financial ability to indemnify the LESSOR, during the term of this agreement, the LESSEE shall obtain and pay premiums for Commercial General Liability insurance protecting the parties hereto, their agents, officers, elected officials, representatives, or employees because of bodily injury, property damage, personal injury or products liability incurred by the parties in the performance of the terms of the lease, such policy to provide limits no less than \$1 million per occurrence. A Certificate of Insurance naming the Moultonborough School District (LESSOR) as an Additional Insured shall be provided.

Such insurance contracts shall be with companies acceptable to the Moultonborough School District and they shall require ten (10) days prior written notice to both parties hereto of any cancellation.

C. ALCOHOLIC BEVERAGES & CONTROLLED DRUGS: In acknowledgement of the Moultonborough School District's strictly maintained policy against the sale, possession, use, abuse, or consumption of alcohol or of controlled drugs as defined in RSA 328-B:1, VI, or of a controlled drug analog as defined under RSA 318-B:1, VI-a, LESSEE covenants and agrees to vigorously enforce said policy during the use of the facilities and premises by the LESSEE, its officers, employees, agents, representatives, contractors, customers, guest and invitees.

Signature of Official Representative of LESSEE: _____

Print Name: _____

Date: _____

Print Title: _____