

Facility Use Application Form

□ Mason High School <mark>*</mark> □ Alaiedon Elementary	 ☐ Mason Middle School ☐ North Aurelius Elementar 	•			
Date Submitted Organization					
Contact Person	Contact Person Email Address				
Daytime Phone	Evening Phone				
Address(Street)	(City)				
(ગાલ્લા)	(Oily)	(Zip)			
Description of Event					
Number of People Attending					
Type of Room Requested:					
HS: Auditorium Fieldhouse Gym Cafete	eria Lecture Room [51] Library	/Media Center Classroom			
Athletic Field					
MS: Gym Cafeteria A or B [with stage] Le	cture Room [22] Library/Media C	enter			
Athletic Field					
Elementary: Gym Multi-purpose Room	n Classroom				
Date(s) Requested:,					
Additional Dates:,,					
Times Requested: Open Door am/pm Event Time am/pm Depart Time am/pm					
Other Needs: Chairs (#) Tables (#) DVD T\	VProjectorScreen	Microphone Data Projector			
Additional Needs:					

*If your activity involves the preparation, serving, or selling of food, a conversation must take place between yourself and the Food Service Director. Permission from the Food Service Director must be granted prior to your application for the Facility Use being approved. Please call (517)676-6529 for Food Services.

Use Agreement:

I have read the facility use guidelines and agree that the activity will be conducted in accordance with it. I further agree to be responsible for all charges incurred as a result of this activity and to assume responsibility for the condition of all facilities and items requested and/or used. In the event of breakage, damage or theft I agree to promptly reimburse Mason Public Schools in the amount of the damage, repair, or replacement cost incurred as a result of this activity. Further, I and the organization or group I represent agree to indemnify (to save and hold harmless) the Mason Public School District, its agents, officers, and employees against property or personal loss damage/or liability that may be suffered by the school

PLEASE read the Facility Use Policy, sign the form, and return:

 Mason High School
 Mason Middle School
 Harvey Education Center

 1001 S. Barnes Street
 235 Temple Street
 400 S. Cedar Street

 Mason, MI 48854
 Mason, MI 48854
 Mason, MI 48854

 (517)676-9055
 (517)676-6514
 (517)676-6528

 Fax: (517)244-6412
 Fax: (517)676-0287
 Fax: (517)676-6536

 Alaiedon Elementary
 North Aurelius Elementary
 Steele Elementary

 1723 Okemos Road
 115 North Aurelius Road
 531 Steele Street

 Mason, MI 48854
 Mason, MI 48854
 Mason, MI 48854

 (517)676-6499
 (517)676-6506
 (517)676-6510

 Fax: (517)676-1978
 Fax: (517)676-0293
 Fax: (517)676-0295

COMPLETED FORMS MUST BE RECEIVED 10 OR MORE WORKING DAYS BEFORE REQUESTED EVENT DATE SUBMITTING THIS FORM DOES NOT ASSURE FINAL APPROVAL OF YOUR REQUEST

Fees are per hour unless otherwise noted. First hour is 2.5 times the rate to cover opening and closing custodial service time. Additional hours are at the rate provided below.

Facilities	Category 1/2 ANYTIME	<u>Category 3</u> M-F / SAT / SUN	<u>Category 4</u> M-F / SAT / SUN	<u>Category 5</u> M-F / SAT / SUN
Classrooms / Library / Media Center (EL/MS/HS) Parking Lots (EL/MS/HS)	No Charge	NC / \$50 / \$75	\$25 / \$60 / \$80	\$35 / \$65 / \$85
Cafeteria (HS) Cafeteria A &/or B (MS) Kitchen (MS/HS)* Room 22 (MS) Gym (EL/MS/HS) Gym Balcony (MS/HS) Athletic Fields (EL/MS/HS) (Except Football Field and Tennis Courts)	No Charge	NC / \$50 / \$75	\$50 / \$75 / \$100	\$75 / \$105 / \$120
Field House (HS) Auditorium (HS) Robotics Center (HS) Pool (HS)** (Additional fee for personnel to be assessed upon event approval)	No Charge	NC / \$50 / \$75 NA / \$95 / \$110	\$60 / \$95 / \$110 NA / \$95 / \$110	\$120 / \$150 / \$165 NA / \$150 / \$165
All weekend and holiday events require a two hour minimum. For holidays, use Sunday rates.				

USE OF EQUIPMENT

TV/DVD Player \$10.00 (Per Event)

Other Equipment Availability and fee to be determined upon request

PERSONNEL MON-FRI SAT SUN *Cook (minimum two hours) \$35.00 \$40.00 \$45.00

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**Water Safety Instructor (WSI)	\$20.00	\$25.00	\$30.00
**Lifeguard	\$20.00	\$25.00	\$30.00
Additional Custodian	\$50.00	\$60.00	\$70.00
Auditorium Technician	\$35.00	\$50.00	\$75.00

For office use only:			
All approved requests must be sent to the District Operations Supervisor for review.			
Date Approved By □ Liability Insurance Required			
Charges:			
Facility Rental	Equipment Rental		
Custodial			
Total Due	Paid		
Notification: Dringing Vitabon F	Loguester Custodian Library Entered		
Notification: Principal Kilchen R	lequester Custodian Library Entered		