

# Building Utilization Form



Organization NANUET LITTLE Representative Jeanne McCauley

Address PO Box 6 Contact # 845-215-9336

Group Type: 1) All Nanuet Youth or Educational & Non-Profit  2) 75% Nanuet & Other than Educational & Non-Profit  3) All Others

### Facilities Requested

School High School Room(s) Gym 3 Grounds MON, TUES, THURS Kitchen \_\_\_\_\_ Other \_\_\_\_\_

Dates Jan 1 - March 15 Times 6-9 (or any 730-730) Purpose Athletic

Will Admission be Charged? Yes  No  # People Expected \_\_\_\_\_ # Vehicles Expected \_\_\_\_\_

Special Needs \_\_\_\_\_ MON, TUES, THURS

### Charges

USE INDOOR BALLS - NO USE 310 SEE ATTACHED  
Charges for use of facilities are based on Board of Education policy. Your signature at the end of this form constitutes acceptance of charges. Fees are due prior to the event. See other side for fee schedule. If requesting the charges be waived, please explain: (Use a separate sheet of paper if needed)

### Insurance Requirements

- The user hereby agrees to effectuate the naming of the District as an unrestricted additional insured on the user's policy
- The policy naming the School District as an additional insured shall
  - o Be an insurance policy from an A.M. Best rated "secured" New York State licensed insurer
  - o Contain a 30 day notice of cancellation
  - o State that the organization's coverage shall be primary coverage for the School District, its Board, employees and volunteers
  - o Additional insured status shall be provided with ISO endorsement CG 2026 or its equivalent
  - o At the District's request, the organization shall provide a copy of the declaration page of the liability and umbrella policies with a list of

- The user agrees to indemnify the District for any applicable deductibles
- Required Insurance: Commercial General Liability Insurance; \$1,000,000 per occurrence/\$2,000,000 aggregate, with coverage for athletic participants
- User acknowledges that failure to obtain such insurance on behalf of the District constitutes a material breach of contract and subjects it to liability for damages, indemnification, and all other legal remedies available to the District. The user is to provide the District with a Certificate of Insurance, evidencing the above requirements have been met. The failure of the District to object to the contents of the certificate or the absence of same shall not be deemed a waiver of any and all rights held by the District.

### Understandings

- Nanuet School District activities and resident requests take precedence over an outside organization activity if conflicts arise
- Only the facilities listed in the request are to be used by the above organization and only for the time and date approved; all persons using the facilities as represented by the above organization must abide by the Rules & Regulations as stated on the reverse side.
- This agreement is not in effect until final approval is given below
- An approved copy of this document must be carried while using the facilities

### Agreement

The undersigned is over 21 years of age and has read both sides of this form and agrees to comply with all regulations. He/she agrees to be responsible to the Nanuet School District for the use and care of the facilities. He/she, on behalf of the named organization, does hereby covenant and agree to defend, indemnify, and hold harmless the Nanuet School District from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of the District's property, facilities and/or services by the named organization.

Signature/Title of Organization's Rep: Jeanne McCauley Date 11/6/15

### Fees & Approvals (Please Initial)

1. Building Administrator [Signature] Date 12/1 or 1a. Director of Athletics [Signature] Date 11/20/15

Custodial Fee: # Regular Hrs _____	x	Hrly Rate _____	=	Total \$ _____	} GRAND TOTAL \$ _____
# Overtime Hrs _____	x	Hrly Rate _____	=	Total \$ _____	
Room or Field Fee _____	+	Extras _____	=	Total \$ _____	

2. Director of Facilities [Signature] Date 11/20/15 3. Assistant Supt for Business \_\_\_\_\_ Date \_\_\_\_\_

4. Superintendent of Schools \_\_\_\_\_ Date \_\_\_\_\_

CC

✓

Date	Facility	Location	Customer	Wkday	Time In	Time Out
9 /29/2015	High School	Café 3	Nanuet Little League	TUES	07:30 PM	09:00 PM
1 /4 /2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
1 /5 /2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
1 /7 /2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
1 /11/2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
1 /12/2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
1 /14/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
1 /19/2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
1 /21/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
1 /25/2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
1 /26/2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
1 /28/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
2 /1 /2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
2 /2 /2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
2 /4 /2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
2 /8 /2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
2 /9 /2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
2 /11/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
2 /18/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
2 /22/2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
2 /23/2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
2 /25/2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
2 /29/2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
3 /1 /2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
3 /3 /2016	High School	Gym III	Nanuet Little League	THU	07:30 PM	09:00 PM
3 /7 /2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
3 /8 /2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM
3 /14/2016	High School	Gym III	Nanuet Little League	MON	07:30 PM	09:00 PM
3 /15/2016	High School	Gym III	Nanuet Little League	TUES	07:30 PM	09:00 PM

# Building Utilization Form



Organization Nanuet little league Representative Terrance mcCauley

Address \_\_\_\_\_ Contact # (845) 215-9336 home (516) 305-3387 cell

Group Type: 1) All Nanuet Youth or Educational & Non-Profit  2) 75% Nanuet & Other than Educational & Non-Profit  3) All Others

### Facilities Requested

School Highview Room(s) gym Grounds \_\_\_\_\_ Kitchen \_\_\_\_\_ Other \_\_\_\_\_

Dates Dec. 1 - Dec. 31 2015 Times 6-9pm Purpose practices

Will Admission be Charged? Yes  No  # People Expected about 10 # Vehicles Expected dropoff

Special Needs USE INDOOR BALLS

### Charges

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  - o Contain a 30 day notice of cancellation
  - o State that the organization's coverage shall be primary coverage for the School District, its Board, employees and volunteers
  - o Additional insured status shall be provided with ISO endorsement CG 2026 or its equivalent
  - o At the District's request, the organization shall provide a copy of the declaration page of the liability and umbrella policies with a list of

- The user agrees to indemnify the District for any applicable deductibles
- Required Insurance: Commercial General Liability Insurance; \$1,000,000 per occurrence/\$2,000,000 aggregate, with coverage for athletic participants
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Signature/Title of Organization's Rep Terrance McCauley, President NLL Date 10/27/15

### Fees & Approvals (Please Initial)

1. Building Administrator \_\_\_\_\_ Date \_\_\_\_\_ or 1a. Director of Athletics FM gym Date 10/30/15

Custodial Fee: # Regular Hrs _____	x	Hrly Rate _____	=	Total \$ _____	} GRAND TOTAL \$ _____
# Overtime Hrs _____	x	Hrly Rate _____	=	Total \$ _____	
Room or Field Fee _____	+	Extras _____	=	Total \$ _____	

2. Director of Facilities [initials] Date 10/29/15 3. Assistant Supt for Business \_\_\_\_\_ Date \_\_\_\_\_

4. Superintendent of Schools \_\_\_\_\_ Date \_\_\_\_\_