FACILITY RENTAL AGREEMENT

LESSEE NAME AND ADDRESS:	LESSOR: GREEN BAY AREA PUBLIC SCHOOL DISTRICT FACILITIES DEPARTMENT P.O. BOX 23387 GREEN BAY, WI 54305	
BILL TO NAME AND ADDRESS:	LESSEE CONTACT PERSON:	
	CONTACT PERSON TELEPHONE:	
SCHOOL:	DATE OF USE:	ESTIMATED ATTENDANCE:
TIME BUILDING IS TO BE OPEN FROM: TO:	TIME OF PROGRAM: FROM: TO:	SCHOOL AUTHORIZATION:
AREA(S) TO BE USED:		
PURPOSE OF USE:		
IS THIS A FUND RAISING EVENT? YES ☐ NO ☐	WILL ADMISSION BE CHARGED? YES ☐ NO ☐ WILL A FEE BE CHARGED TO STUDENTS? YES ☐ NO ☐ IF YES, AMOUNT CHARGED $_____	
CHECK ONE NOT FOR PROFIT GROUP ☐ FOR PROFIT GROUP ☐ NOT FOR PROFIT GROUP PLEASE PROVIDE VERIFICATION	DO YOU NEED TO USE THE KITCHEN? YES ☐ NO ☐ IF YES, PLEASE COMPLETE KITCHEN RENTAL AGREEMENT FORM.	
WILL YOU BE SERVING FOOD OR BEVERAGE? YES ☐ NO ☐		

FOR DISTRICT TECHNOLOGY USE, PLEASE ANSWER THE FOLLOWING QUESTIONS:
HOW MANY PCS WILL YOU NEED? WHAT SOFTWARE WILL YOU NEED?
WILL YOUR STUDENTS NEED ACCESS TO THE INTERNET? YES ☐ NO ☐
WILL YOUR STUDENTS BE SAVING DOCUMENTS AND/OR MULTIMEDIA TO OUR NETWORK? YES ☐ NO ☐
WHAT HARDWARE WILL YOU NEED?

SPECIAL INSTRUCTIONS:
A CERTIFICATE OF INSURANCE MUST BE ATTACHED TO THE AGREEMENT. (SEE INSURANCE ADDENDUM)

Additional Information:

The lessee shall indemnify and hold harmless the Lessor from any and all claims or demands arising out of the Lessee's use of the premises (as described in this rental agreement) or the ways adjoining, and at the Lessee's cost and expense shall defend and protect the Lessor against any and all such claims or demands.

THE LESSEE HAS READ, UNDERSTANDS, AND AGREES TO ALL OF THE CONDITIONS SET FORTH IN THE AGREEMENT AND THE FOLLOWING ADDENDA:

1. BOARD OF EDUCATION POLICY 830 AND RULE 830 FACILITY USE RULES AND REGULATIONS.
2. RECREATIONAL USE OF SCHOOL FACILITIES REQUEST/AGREEMENT
3. INSURANCE REQUIREMENTS
4. RENTAL RATE SCHEDULE

_____ _____

LESSEE SIGNATURE GREEN BAY AREA PUBLIC SCHOOL DISTRICT

_____ _____

DATE DATE

COMPLETED FORM SHOULD BE EMAILED TO lrfrisch@gbaps.org