

North Bellmore UFSD  
2616 Martin Avenue  
Bellmore, NY 11710

APPLICATION FOR USE OF FACILITIES

<b>FOR OFFICE USE ONLY</b>	
Director of Facilities' Office:	
Approved _____	Denied _____
Building Principal:	
Approved _____	Denied _____
Business Office:	
Approved _____	Denied _____
Fee \$ _____	
Insurance Certificate _____	

**Complete and Submit To:**  
Office of the Director of Facilities  
North Bellmore UFSD  
2616 Martin Avenue  
Bellmore, NY 11710

*Individual applications MUST be submitted for each facility and/or event –  
no less than seven (7) days prior to the date of the activity*

Today's Date \_\_\_\_\_ School Requested \_\_\_\_\_ Room Requested \_\_\_\_\_  
Date(s) Requested \_\_\_\_\_ Time: From \_\_\_\_\_ am/pm To \_\_\_\_\_ am/pm

**INFORMATION ABOUT GROUP REQUESTING FACILITY**

Name of Organization / Individual \_\_\_\_\_

Supervisor in Charge \_\_\_\_\_ Mailing Address \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name of adult in attendance who will be supervising the group: \_\_\_\_\_

Address \_\_\_\_\_ Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

RESPONSIBILITY OF EACH ORGANIZATION TO PROVIDE A GREETER: Name \_\_\_\_\_

Address \_\_\_\_\_ Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

**INFORMATION ABOUT INTENDED USE OF SCHOOL DISTRICT FACILITY**

1. Purpose : \_\_\_\_\_

2. Total Participants Expected: \_\_\_\_\_ Adults \_\_\_\_\_ Children\*

\* Number of Residents of this school district \_\_\_\_\_ Number of Non-Residents \_\_\_\_\_

3. Is Equipment required? \_\_\_ Yes \_\_\_ No

If Yes – state what type and for what purpose: \_\_\_\_\_

4. Is an admission fee charged? \_\_\_ Yes \_\_\_ No

If so, what will proceeds be used for: \_\_\_\_\_

5. Will refreshments be served? \_\_\_ Yes \_\_\_ No

If yes, please give details: \_\_\_\_\_

6. Name of Insurance Carrier: \_\_\_\_\_ Amount \$ \_\_\_\_\_

**AGREEMENT:** The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the North Bellmore UFSD for the use and care of the facilities. He/she, on behalf of \_\_\_\_\_ (Name of Organization) does hereby covenant and agree to defend, indemnify and hold harmless the North Bellmore UFSD 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 North Bellmore School District's property, facilities and/or services by \_\_\_\_\_ (Name of Organization).

Signature of Organization's Representative: \_\_\_\_\_ Address: \_\_\_\_\_

Print Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

The signature of the Organization's Representative denotes full recognition that he/she has read the attached FACILITIES USE REQUIREMENT SHEET outlining the rules for the appropriate use of the North Bellmore UFSD District Facilities. Furthermore, the signature indicates that the rules and regulations have been communicated to all individuals who hold supervisory responsibilities.

Signature of District's Representative: \_\_\_\_\_