Trussville City Schools Use of Facilities Agreement For Trussville Parks and Recreation

The request for use of facilities based on this form is a communication between key personnel in Trussville City Schools and Trussville Parks and Recreation, conditional upon acceptance by Trussville City Schools. Please provide the information below for consideration.

Date of this request:	
Event or Program Title	
Sponsored by Trussville Parks and Recreation	Yes No
Is this for Trussville students only	Yes No
Is this a Fund Raiser	Yes No
Age group of students involved:	
Verification of Liability Insurance	Please attach a copy of your Verification of Liability Insurance to the Agreement. The Superintendent of Education may at her discretion, waive the requirements of this paragraph.
Acceptance of this offer of Use of Facilities and provided below and returning the original copy	the provisions of this Agreement should be indicated by signing in the spaces
In exchange for the use of the school facility list	ted above, applicant expressly agrees:
1. That Trussville City Schools reserves th	e right to terminate this agreement at any time (Example of possible termination:
loss of utilities (power, water, etc.), in	npending inclement weather, unexpected need by TCS, etc.)
This agreement must be turned	I in six weeks in advance of start date for requested event.
2. To use the school facilities only for the	purpose identified above.
3. To enforce the Board's prohibition aga	inst smoking, drugs, alcohol, weapons and other such activities and/or items on
school property.	
To indemnify and hold harmless the To	russville City Board of Education, including all officials, agents and employees,
separately and collectively, from any a	and all claims arising from applicant's use of the school facility. This indemnity to pay any adverse judgment against the School Board arising from applicant's use
	ant to provide the Board, its officials, agents and employees, with legal defense at
applicant's expense which includes co	
	nd all damages to the school facility caused, directly or indirectly, by the applicant's
use of the facilities.	
 The applicant also agrees to clean up to found. This involves and is not limited 	before they leave that facility. The facility should be returned in the condition it was
	bage cans to the dumpster, and replacing garbage bags.
 Cleaning, disinfecting and restocl 	
	cility. Alarm is set and doors are locked
	acility will result in an individual billing rate of \$75.00 per hour for each technician
	time the technician is called. Failure to pay the invoice may result in termination of
the use of facilities.	
I acknowledge that I have read, understand and	d agree to abide by all provisions of the foregoing agreement. I have attached a
calendar showing specific dates and times, plus	s verification of insurance.
Director of Parks and Rec Signature:	Date:
Lealers dedec the till have used understand an	d anna ta shida hu all provisions of the foregoing agreement
Tacknowledge that I have read, understand and	d agree to abide by all provisions of the foregoing agreement.
Supervisor or Coach Responsible for Event Rec	nuested:
Name (Please Print):	Signature:
Date:	Email:
Phone:	Cell Number:

a.

- *

	 ach facility being requested below.	
Paine Campus	Specify area requested:	
Magnolia Elementary	Specify area requested:	
Cahaba Elementary	Specify area requested:	
Hewitt Trussville Middle	Specify area requested:	
Hewitt Trussville High	Specify area requested:	

NEXT STEPS:

- 1. Complete the attached calendar to show specific dates and times of this request.
- 2. Upon completion of these forms, please return to TCS.
- 3. TCS will submit the form for signatures below and board approval.
- 4. Parks and Rec will be notified after Board approval.

FOR INTERNAL USE ONLY:

Paine Elementary	Date:	Principal Signature:
Magnolia Elementary	Date:	Principal Signature:
Cahaba Elementary Principal	Date:	Principal Signature:
HTMS	Date:	Principal Signature:
HTMS Assistant Principal	Date:	Principal Signature:
нтнѕ	Date:	Principal Signature:
HTHS Asst. Principal	Date:	Principal Signature:
Athletic Director	Date:	Signature:
Assistant AD for Football	Date:	Signature:
Track and Field Coaches	Date:	Signature:
Facilities Coordinator	Date:	Signature:
TCS CFO	Date:	Signature:

Date of Board approval: _____

Revised: January 26, 2021

February 2022	School/Room:	Write in the dates
	Activity:	and times on the calendar for the
	Coach/Person Responsible:	request.

.

a

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	1	2	3	4	5

March 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
	Coach/Person Responsible:	request.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	1	2	3	4	5
7	8	9	10	11	12
14	15	16	17	18	19
21	22	23	24	25	26
28	29	30	31	1	2
	28 7 14 21	28 1 7 8 14 15 21 22	28 1 2 7 8 9 14 15 16 21 22 23	28 1 2 3 7 8 9 10 14 15 16 17 21 22 23 24	28 1 2 3 4 7 8 9 10 11 14 15 16 17 18 21 22 23 24 25

April 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
	Coach/Person Responsible:	request.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
	Coach/Person Responsible:	request.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

June 2022	School/Room:	Write in the dates
	Activity:	and times on the calendar for the
	Coach/Person Responsible:	request.

.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2

July 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
	Coach/Person Responsible:	request.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	1	2
4	5	6	7	8	9
11	12	13	14	15	16
18	19	20	21	22	23
25	26	27	28	29	30
1	2	3	4	5	6
	27 4 11 18 25	27 28 4 5 11 12 18 19 25 26	27 28 29 4 5 6 11 12 13 18 19 20 25 26 27	27 28 29 30 4 5 6 7 11 12 13 14 18 19 20 21 25 26 27 28	27282930145678111213141518192021222526272829

August 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
	Coach/Person Responsible:	request.

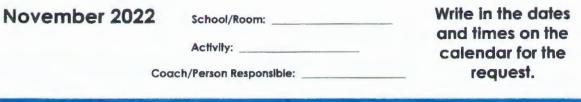
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6
8	9	10	11	12	13
15	16	17	18	19	20
22	23	24	25	26	27
29	30	31	1	2	3
	1 8 15 22	1 2 8 9 15 16 22 23	1 2 3 8 9 10 15 16 17 22 23 24	1 2 3 4 8 9 10 11 15 16 17 18 22 23 24 25	1 2 3 4 5 8 9 10 11 12 15 16 17 18 19 22 23 24 25 26

September 2022	School/Room:	Write in the dates and times on the
	Activity:	calendar for the
Co	ach/Person Responsible:	request.

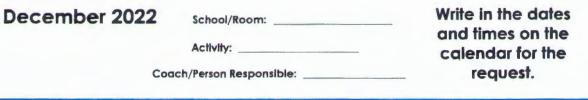
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

School/Room:	Write in the dates
Activity:	and times on the calendar for the
Coach/Person Responsible:	request.
	Activity:

29 30 1
6 7 8
13 14 15
20 21 22
27 28 29
3 4 5



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3



0 1

ь

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27)	28	29	30	1	2	3
4.	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31