

**GARDNER PUBLIC SCHOOLS  
APPLICATION FOR THE USE OF SCHOOL FACILITIES**

Date: \_\_\_\_\_

1. **Applicant Name and Address:** \_\_\_\_\_

2. **Purpose:** \_\_\_\_\_

**Will admission be charged:**  YES  NO **If "Yes", amount/person:**  
*(Please note Section 7, Paragraph A of the Regulations.)*

3. **Facility(ies) Desired:** \_\_\_\_\_ **Athletic Fields:** \_\_\_\_\_

4. **Dates Desired:** \_\_\_\_\_ **Start Time:** \_\_\_\_\_ **End Time:** \_\_\_\_\_

5. **Will the activity be open to the public?**  YES  NO

6. **Person in Charge:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

7. **Please indicate your general liability insurance policy:**

a. **Company:** \_\_\_\_\_

**Liability Limits: Bodily Injury:** \_\_\_\_\_ **Property Damage** \_\_\_\_\_  
*(Please attach the Certificate of Insurance naming the City of Gardner as an "Additional Named Insured".)*

b. If there is no insurance coverage, please sign the "Hold Harmless Agreement" below.

**HOLD HARMLESS AGREEMENT**

The undersigned agrees that he/she will indemnify and hold free and harmless the Gardner Public Schools, the School Committee, and the City of Gardner from any and all claims or actions for damages or loss to property, including the loss and use thereof, and from any and all claims or actions for personal injury, sickness or disease, including personal injury, if caused by then undersigned's acts or omissions, and the undersigned will pay any and all judgement decrees, costs, including attorney's fees which may be rendered against the Gardner Public Schools, the School Committee or the City of Gardner, its officers, agents or employees, in any and all such actions or proceedings.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CERTIFICATION**

I CERTIFY that the meeting or activity described in Item # 2 will not be for a commercial or a religious purpose. (Note Section 1.E & 1.J of the Regulations). Further, I have read the School Committee Policy DFG and the accompanying regulations DFG-R and agree to abide by them. This application is made on behalf of the organizations listed above. However, I agree to assume personal responsibility for any damage to the facilities and/or any extra costs incurred by the Gardner Public Schools and for any payment due to the City of Gardner that the organization does not make.

**Date:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_ **Position:** \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

**SCHOOL USE ONLY**

**Approved by Building Principal:**  YES  NO

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approved by Athletic Director:**  YES  NO

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Approved by School Business Director:**  YES  NO **If "No", state reason:** \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Fees: Custodian:** \_\_\_\_\_ **User:** \_\_\_\_\_

**All fees are to be paid directly to the Superintendent's office within 10 days of receipt of invoice. Please make your check payable to the City of Gardner.**