

APPLICATION REQUEST FOR USE OF DISTRICT FACILITIES

HINSDALE TOWNSHIP HIGH SCHOOL DISTRICT 86
Administration Building, 5500 S. Grant Street, Hinsdale, IL 60521
630-655-6100 phone - 630-325-9153 fax

Applications **must** be completed electronically. *To allow for processing, application must be received at least two weeks prior to the function.* A copy of the approval will be sent by email along with detailed usage charges.

Name of requesting organization : _____

Is this a non-profit group located within District 86? No Yes *(If Yes, you must provide copy of 501(c)3.)*

Address : _____ City/State/Zip : _____

Contact Person : _____ Email : _____
(required)

Daytime Phone : _____ Evening Phone : _____

Building Requested:	<input type="checkbox"/> Hinsdale Central High School 55th & Grant Streets, Hinsdale, IL 6052 (630) 570-8000	<input type="checkbox"/> Hinsdale South High School 7401 Clarendon Hills Road, Darien, IL 60561 (630)468-4000
<i>Forward completed Application to:</i>	<i>HinsdaleCentralRental@hinsdale86.org</i>	<i>HinsdaleSouthRental@hinsdale86.org</i>

Facility Used For: _____ Start Time: _____ AM PM End Time: _____ AM PM

Date(s) wanted: _____ Is there an admission charge? Yes No
(Attach separate sheet, if necessary.)

Area(s) : Auditorium Little Theater Gymnasium Fieldhouse Cafeteria Classroom(s) Pkg. Lot
(South only)

Pool Stadium Outdoor Track Athletic Field (list): _____

Other: _____

Specialized Equipment Needed: _____ Est. Attendance: _____

CERTIFICATE OF INSURANCE (COI) IS REQUIRED TO ACCOMPANY EACH APPLICATION.

COI must indicate "CERTIFICATE HOLDER" as:

HINSDALE TOWNSHIP HIGH SCHOOL DISTRICT 86 — 55th & Grant Streets, Hinsdale, IL 60521

District 86 Board of Education requires a hold-harmless indemnification supported by a certificate of insurance which lists District 86 as "additional insured" and requires the minimum amounts as follows:

General Liability Occurrence:

ANY PERMIT SHALL BE SUBJECT TO THE BOARD POLICY OF 'COMMUNITY USE OF SCHOOL FACILITIES' WHICH MAY BE INSPECTED AT THE ADMINISTRATION OFFICE AND IS INCORPORATED HEREIN BY REFERENCE, INCLUDING THE BOARD'S RIGHT IN ITS SOLE DISCRETION TO SUSPEND OR CANCEL THIS PERMIT AND REFUND THE FEE.

General Aggregate.....	\$2,000,000	Each Occurrence.....	\$1,000,000
Products. Comp/Op Aggregate.....	\$1,000,000	Fire Damage.....	\$50,000
Personal & Adv. Injury.....	\$1,000,000	Medical Exp. (Any One Person).....	\$5,000

By signing below, the Applicant agrees to abide by all laws governing its use of the school district's property, including the *Physical Fitness Facility Medical Preparedness Act.* **Applicant Initials** _____

Signature of Applicant _____ Date _____

Building Supervisor _____ Date _____ Assistant Principal _____ Date _____

Approved by Business Manager _____ Date _____

(Refer to <http://www.hinsdale86.org/departments/BusinessOffice/> for a list of facility charges.)

<i>For office use only</i>	Rental Fee:	Air Conditioning:	Equipment Rental:
	Labor Charge:	Other Charge(s):	TOTAL CHARGES: