

## APPLICATION FOR LEASE OR COMMUNITY USE OF SCHOOL FACILITIES AND GROUNDS

APPLICATION MUST BE FILED WITH THE SCHOOL PRINCIPAL (FOR SCHOOL FACILITIES) OR ATHLETIC DIRECTOR (FOR SPORTS FACILITIES) NOT LESS THAN THIRTY (30) DAYS BEFORE THE DATED OF INTENDED USE. ALL INFORMATION MUST BE FURNISHED BEFORE APPLICATION CAN BE PROCESSED. APPLICATION MUST BE SUBMITTED TO THE LEASE COORDINATOR THIRTY (30) DAYS PRIOR TO THE SCHEDULED EVENT. FEES WILL BE COMPUTED AND LESSEE NOTIFIED. FEES MUST BE PAID TEN (10) WORKING DAYS PRIOR TO SCHEDULED EVENT. MAKE CHECK PAYABLE TO RICHMOND COUNTY SCHOOL SYSTEM. NO LEASE IS FINAL UNTIL FEES HAVE BEEN PAID, THE LEASE FORMALIZED IN WRITING AND SIGNED BY THE SUPERINTENDENT OF SCHOOLS. LEASE APPLICATIONS WHICH ARE NOT RECEIVED BY THE ABOVE SUSPENSE DATES WILL BE DISAPPROVED. LEASE COORDINATOR IS LOCATED AT THE MAINTENANCE AND FACILITIES DEPARTMENT, 2956 MIKE PADGETT HWY, AUGUSTA, GEORGIA 30906 (PHONE 706-737-7197).

1.	Facility Requested (identify school and spec	cility Requested (identify school and specific facility)					
2.	Activity Date(s)	ty Date(s) Building to open		Building to close			
	From:	a.m.	p.m.	a.m	p.m.		
	To:	a.m.	p.m.	a.m	p.m.		
	NOTE: when schools are closed because of inclement	weather, all facilitie	es use is canceled. Users ar	e responsible for notifying their memb	erships.		
3.	Individual or organization						
	Address						
	(Street)	(C	county or city)	(State)	(Zip		
	Phone_						
	E-mail address						
4.	Type of activity						
5.	Will you attend? Yes No if not, who will be in charge?						
	(Name)			(Phone)			
6.	*Is organization a nonprofit?	_ Yes _	No				
7.	Is there a third-party contract or arrangemen Name of individual or organization:				lo		
8.	Does the user collect fees?	_ Yes _	No				
	Admission:         Adults         \$	Ar Ac	nnual \$ dvertisement \$				
9.	Number of people projected to attend:						
<u>10.</u>	Requirements (specify): Principals – Please	include Numb	per of Requested Per	sonnel (For Ex. 2 Custodians SPECIAL	s)		
	RENTAL	PERSONNE	:L	EQUIPMENT/SERVI	CE (specify)		
	Auditorium		ctivities Supervisor				
	Cafeteria		hletic event worker				
	Cafeteria w/kitchen		afeteria staff				
	Classroom(s)		ustodian	-			
	Gymnasium Other		aculty supervisor aintenance or sound t	toch			
	OuiGi		udent technician		<del></del>		
11.	Addendum attached? [ ] Yes [ ] No						
12.	Proof of Insurance Attached? [ ] Yes [ ] I	No					
Prin	ted Name of Requestor:						
Sign	nature :		( Date	e)			

## ACTION BY SCHOOL PRINCIPAL / THE DEPARTMENT OF FACILITIES AND MAINTENANCE

Date Applica Date of the B	plication Received: the Event:	
	imeline? [ ] Yes [ ] No (if "no" disapproved the request)	
	CALCULATION OF ESTIMATED FEES	
1.	Facility Rental (includes clean up fee:	
2.	2. Custodian Fees:	
3.	3. Clean up Fee:	
4. 5.		
	Cost of School/Sports fees	
Po	Police, Fire, or EMT support is [ ] is not [ ] required.	
Re	Recommend: [ ] Approval [ ] Disapproval	
So	School:	
Printed Nam	Name of SCHOOL PRINCIPAL APPROVAL:	
Signature:	<mark>re:</mark> Date:	
Public Safet	I BY THE DEPARTMENT OF SCHOOL SAFETY  afety Support [ ] is [ ] is not required for this function. The cost of this support is estimated to from the Richmond County School System Public Safety is required for this function. Applicant	
directly with	with the Public Safety Office for this service:	·
Signed:	Date:	
Lease Comp	completed on:	
	igned on:	