

**Section K: School – Community – Home Relations**

**KF-R Facility Use Form and Fee Schedule**

1. For security and parking reasons, use of the Student Room will be limited to no more than 35 people on days that school is in session
2. Events held on school days shall require all participants to be properly identified through visitor badges provided by the event
3. All use of the Student Room and room configurations must meet safety and fire standards and be approved by the Maintenance Director
4. Evening use of the Student Room shall not exceed 75 people
5. Set up arrangements should be confirmed via email with the Administrative Secretary or Maintenance Director
6. Catering arrangements should be confirmed via email with one of the Chefs
7. Technology arrangements should be confirmed via email with the Computer Systems Manager
8. All fees will be paid in advance of use of school facilities

Fees:

Student Room

- \$30 per meeting up to 25 people
- \$50 per meeting up to 35 people
- \$75 per meeting up to 75 people
- For Profit organizations will be charged an additional \$100 fee

Teacher Conference Room

- \$15 per meeting up to 6 people

Director Conference Room

- \$20 per meeting up to 8 people

Classroom

- \$25 per meeting (number of people allowed as dictated by classroom requested)

Custodial

- \$25 per hour if the meeting is held outside of regularly scheduled hours

The above fees may be waived or adjusted as appropriate at the discretion of the Director.

**Mid-Coast School of Technology  
Facility Use Request**

This agreement is made between Region 8 and:

\_\_\_\_\_

Name of organization or individual representing an organization:

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Description of Use: \_\_\_\_\_

\_\_\_\_\_

Date/Time(s): \_\_\_\_\_

Total Rental Fees: \$\_\_\_\_\_ (Provided by the Director and/or designee)

This form must be submitted one week in advance of the event with all rental fees and other documentation as requested, i.e. Certificate of Insurance.

On behalf of the above organization, I certify that I have read and agree to the terms of the attached Policy and agree to all fees as listed above. I agree to provide adequate adult supervision at all times during the use of the facilities and I will assume responsibility for all fee charges and to indemnify and hold harmless the Region 8 Cooperative Board, officers, agents, employees and students (Releasees) from any and all claims, actions, losses, damages, liabilities and expenses (including without limitation attorney's fees) of any kind (claims), including claims arising by or arising from the negligence of Releasees, arising out of this contract and/or the use of this facility or the equipment, other school property or school premises.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Lessee Signature Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Director or Designee Signature Date

First Reading: 11/17/10, 8/26/15  
Second Reading: 12/15/10, 9/30/15  
Revised: 8/18/15  
Reviewed: \_\_\_\_\_