

# Bristol Virginia Public Schools

## Application for Community Use of Facilities

All information must be furnished before application can be processed. Applications must be filed with the school principal NOT LESS THAN 15 WORKING DAYS BEFORE INTENDED USE.

1. Requested School \_\_\_\_\_
2. Activity Date(s) Day of the Week Building to be Open Closed  
 \_\_\_\_\_ AM \_\_\_\_\_ PM  
 \_\_\_\_\_ AM \_\_\_\_\_ PM
3. Individual/Organization \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_ Cell/Home/Office (Circle One)
4. Is organization a nonprofit? (Circle) YES NO  
 If yes, include documentation of your nonprofit status.
5. Is organization a BVPS school related group such as a PTA, Booster Club, or school related student activity? YES NO
6. Will the user collect fees/admissions/donations? YES NO  
 Amount: \_\_\_\_\_  
 NOTE: The City of Bristol Virginia requires certain organizations collect an admissions tax for certain events. Please contact the Commissioner of Revenue Office for additional details and requirements. Phone: 276-645-7316
7. Number of people projected to attend \_\_\_\_\_
8. Request (Circle All Applicable):  
 Auditorium \_\_\_\_\_  
 Board Room (Central Office only) \_\_\_\_\_  
 Cafeteria \_\_\_\_\_  
 Cafeteria w/ Kitchen \_\_\_\_\_  
 Classroom (s) \_\_\_\_\_  
 Gymnasium (for VHS specific new or old gym) \_\_\_\_\_  
 Other (detail, such as parking lot) \_\_\_\_\_
9. Custodial staff is required for all community use. The cost will be \$25 per hour and will be included in your rental fee.  
 Hours of expected use \_\_\_\_\_ x \$25 = \_\_\_\_\_
10. If utilizing cafeteria with kitchen, a cafeteria employee is required to be on site. The cost will be one and one-half the hourly rate listed for the working cafeteria employee.  
 Hours of expected use \_\_\_\_\_ ± 1 hour open/close time x 1.5 times listed hourly rate of \$\_\_\_\_\_ = \_\_\_\_\_
11. If renting Virtual Reality Lab, \_\_\_\_\_ hours of use x \$50/hr = \_\_\_\_\_

The undersigned agrees to pay application fees assessed and certifies that he or she has read, and will abide by, current Bristol Virginia School Board policy to include Regulation KG-R attached to this application. The undersigned shall be liable for any and all claims or damages resulting from use of the school facility, including, but not limited to, damage to School Board property by the user, as well as any costs, fees and damages resulting from the user's failure to comply with any federal, state or local law, regulation or other requirements. The undersigned shall ensure the prompt and proper adjustment of all such claims. The undersigned hereby certifies that he/she has checked the "Sex Offender and Crimes Against Minors Registry" on the Internet at <http://sexoffendor.vsp.virignia.gov/sor/index.htm> and that none of the personnel involved with the entity, or the program sponsored by the entity appear on the Registry at this date.

\_\_\_\_\_  
 (Print Name) \_\_\_\_\_ (Email)  
 \_\_\_\_\_  
 (Signature) \_\_\_\_\_ (Date)

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

### Facility Rental

- a. Auditorium \_\_\_\_\_
- b. Board Room (Central Office only) \_\_\_\_\_
- c. Cafeteria \_\_\_\_\_
- d. Cafeteria w/ Kitchen (must have cafeteria staff below) \_\_\_\_\_
- e. Classroom (s) \_\_\_\_\_
- f. Gymnasium (for VHS specific new or old gym) \_\_\_\_\_
- g. Other (detail) \_\_\_\_\_

SUBTOTAL OF FACILITY RENTAL \$ \_\_\_\_\_

### Personnel (Estimated)

- a. Custodial (may be waived at discretion of principal if a school employee will be present) \_\_\_\_\_
- b. Cafeteria \_\_\_\_\_
- c. Other \_\_\_\_\_

SUBTOTAL OF PERSONNEL \$ \_\_\_\_\_

**ESTIMATED PAYMENT REQUIRED IN ADVANCE** \$ \_\_\_\_\_

### Type of Organization (Circle One)

- Group I: Bristol Virginia School-Related Group
- Group II: Non-Profit Group (IRS document declaring nonprofit status received) or Another School Division or College
- Group III: Other Public or Private Users

### Liability Insurance (At a minimum, must have event insurance)

Documentation received? YES NO

Expiration Date \_\_\_\_\_

<http://www.vacorp.org/coverages/tulip-event-insurance/>

### Approval

Printed Name of Principal, if approved \_\_\_\_\_

Signature of Principal \_\_\_\_\_

### Collection of Fee

Estimated fee of \_\_\_\_\_

Received on \_\_\_\_\_

Check Number \_\_\_\_\_ Cash \_\_\_\_\_ Other \_\_\_\_\_

Receipt # \_\_\_\_\_

	GROUP I	GROUP II	GROUP III
Auditorium - VMS	No Charge	\$ 75.00	\$ 125.00
Auditorium – VHS	No Charge	\$ 250.00	\$ 500.00
Board Room – Central Office	No Charge	\$ 50.00	\$ 75.00
Cafeteria	No Charge	\$ 25.00	\$ 50.00
Cafeteria w/ Kitchen	No Charge	\$ 50.00	\$ 75.00
Classroom(s)	No Charge	\$ 10.00 each	\$ 10.00 each
Gymnasium – HV, SJ, WL	No Charge	\$ 50.00	\$ 50.00
Gymnasium – VP	No Charge	\$ 60.00	\$ 60.00
Gymnasium – VMS	No Charge	\$ 75.00	\$ 125.00
Gymnasium – VHS NEW GYM	No Charge	\$ 250.00	\$ 500.00
Gymnasium – VHS OLD GYM	No Charge	\$ 50.00	\$ 100.00
Parking Lot	No Charge	No Charge	No Charge
Virtual Reality Lab	No Charge	\$ 250.00	\$ 500.00

**EVENT INSURANCE INFORMATION:**

<http://www.vacorp.org/coverages/tulip-event-insurance/>

Location Name	Facility Location Code
Virginia Middle School	4809-287
Virginia High School	4809-286
Stonewall Jackson	4809-291
Central Office	4809-289
Highland View	4809-292
Washington Lee	4809-290
Van Pelt	4809-288