



Otsego Area Occupational Center
PO Box 57
1914 County Route 35
Milford, NY 13807

Phone: 607.286.7715 Extension 505 * Fax: 607.286.9603

Facilities Use Request Form

Today's Date _____	Certificate of Insurance <input type="checkbox"/> Attached <input type="checkbox"/> On File
Organization Name _____	Phone Number _____
Contact Name _____	Phone Number _____
Address _____	

Event Name _____	Event Date(s) _____
Event Purpose _____	Number of People Expected _____
<u>Facilities requested (Be Specific):</u>	<u>Equipment/Furniture Needed;</u>
_____	_____
_____	_____
_____	_____
Hours that facilities will be needed (Please include set up and clean up time): _____	
Actual times event will start and end: _____	
School Personnel Needed: _____	

We expect all users of this facility to treat it with care and respect.

We appreciate your assistance in keeping this facility in the condition that it is in.

See next page for terms and conditions of using this facility, as well as for signatures.

The _____ agrees to:
Organization Name

- Make payment (if required) prior to requested use of property.
- Leave property in the same condition as it was upon arrival.
- Abide by all fire and safety regulations.
- Use facilities and equipment for only those purposes for which they were intended.
- Allow no liquor, smoking or drugs on premises.
- Provide sufficient adult supervision to assure an orderly activity.
- Use of support services such as telephones, copiers, computers, and AV equipment will be permitted only upon specific request. An additional charge may be made.
- Indemnify the school for any liability arising out of the actions of the organization or its agents incidental to the use of the facilities by the organization.
- Reimburse the school for any damage (beyond normal wear and tear) to the facilities resulting from their use.
- Provide evidence of appropriate insurance protection (if requested) covering property damage, personal injury or death arising out of the use of the school facilities.
- The organization will compensate the Otsego Northern Catskills BOCES (ONC BOCES) for any additional costs over and above the normal operating costs incurred in providing the facilities.
- The supervisor in charge will assume responsibility of the total facility and provide additional supervisory help to confine activities to the area requested.
- If kitchen facilities are required, a BOCES employee must supervise use of the kitchen.
- No authorization will be given to private commercial enterprises to operate on school property.
- If the scheduled event is cancelled, the Building Maintenance Supervisor must be notified at least seven (7) days prior to the scheduled event.
- Observe all posted rules for the maintenance and care of the building.

Organization Representative Signature

Date

Principals Signature

Date

Building and Maintenance Supervisor Signature

Date