

## Genoa-Kingston CUSD #424 Building Use Procedures for Non-School Groups

Genoa-Kingston CUSD 424 believes school facilities should be available to the community for educational, civic, cultural, and other non-commercial uses consistent with the public interest when such use does not interfere with the school program or school sponsored activities. Persons on school premises must abide by the District's conduct rules at all times. These procedures apply to all non-school district groups. In short, treat the facility with respect and leave it as you found it.

The following District facilities are available for use, in accordance with the Facilities Use Guidelines.

<b>Kingston Elementary School</b> 100 School Street Kingston IL 60145 815/784-5246 815/784-9049 fax	<b>Genoa Elementary School</b> 602 E. Hill Street Genoa, IL 60135 815/784-3742 815/784-3731 fax	<b>Genoa-Kingston Middle School</b> 941 W. Main Street Genoa IL 60135 815/784-5222 815/784-4323 fax
<b>Genoa-Kingston High School</b> 980 Park Avenue Genoa IL 60135 815/784-5111 815/784-3124 fax	<b>Genoa-Kingston CUSD #424 District Office</b> 980 Park Avenue Genoa IL 60135 815/784-6222	

### When school recesses for summer break, buildings are not available.

1. Building use application may be obtained at any District #424 facility.
2. Completed *Building Use Form* shall be delivered or mailed to the District Scheduler, Christi Volkening, in the District Office. The District Scheduler must have the request as early as possible, and no approval for district use can be made less than 48 hours prior to the event. The name and contact information of ONE person who is in charge of the requesting group ("Group Leader") must be clearly identified. This person must be present during the entire event.
3. Security deposit of \$300 must be delivered to the District Scheduler (or designee) in the District Office during normal business hours at least 48 hours prior to the event.
4. Invoice of actual costs will be sent to the Group Leader after the event.
5. If deemed necessary by the District Scheduler, a district employee supervisor may be assigned to the event. That supervisor will be in charge of the building and will serve as a liaison to the Group Leader. In conjunction with the supervisor, the Group Leader is responsible for the behavior of all persons attending and participating in the event.
6. If the Kitchen is used in any of the buildings, a Food Service Employee will need to be present during the event.

District employee Supervisor: \$25 per hour  
 Custodian: \$25 per hour  
 Food Service Employee: \$25 per hour  
 Snow Removal/Salting and other safety measures: \$25 per hour/per staff member  
 Supplies, damage, Dumpster, and other district-incurred costs: Actual costs will be billed  
 Deposit of \$300 required prior to event.

# Request for Use of Genoa-Kingston CUSD #424 School Facilities

**Emergency Phone Number 815/757-2227 or 815/355-6238**

A signed copy of this form, a Certificate of Insurance, and a **\$300** security deposit made out to “GK Schools” must be submitted along with this application. Completion of and signature on this form indicates the understanding that the requesting group as a whole and the Group Leader is responsible for supervising all who attend the event. In addition, the group and the Group Leader must accept ultimate responsibility for those attending the event and for any costs incurred or any damage to GK property.

Name of Organization:	School Requested:  HS      MS      GES      KES
Person in Charge (Group Leader):	Dates and Times Requested:
Group Leader Contact Information:	Purpose of Use (Describe the event):
Additional equipment requested:	Part(s) of building requested:
Will any sort of registration fee, participation fee, or entry fee be collected? Please provide details:	

**I have read the Building Use Procedures and agree to abide by its contents.**

Group Leader Signature: \_\_\_\_\_

**District Scheduler certifies receipt of:**

Certificate of Insurance:	Security Deposit:	Event Approved or Denied
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Principal Signature: \_\_\_\_\_

District Scheduler Signature: \_\_\_\_\_

Date: \_\_\_\_\_