

This Use of Staff School Use of Facilities approved for use 8/18/2021

### Staff Request for Use of School Facilities

(Request will be approved on a first come first serve basis)

TEACHER OR GROUP: \_\_\_\_\_ DATE: \_\_\_\_\_

SCHOOL AFFILIATION (circle one) FUHS IVY OASIS SEIU FHSTA

RESPONSIBLE PERSON DURING THE EVENT: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

Area Requested	Activity/Event	Date(s)	Arrival Time	Event Begins	Event Ends	Departure Time	Total Hours

Will food of any kind be served? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe requested setup, if special layout is requested (attach layout on separate sheet if needed):

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**Expected Attendance**

Adults \_\_\_\_\_ Children \_\_\_\_\_

- \* Smoking, Drugs and Alcohol are prohibited at all FUHSD facilities
- \* Applicant agrees to abide by all other rules and regulations of FUHSD
- \* FUHSD functions take precedence over public functions

- ADDITIONAL PERMITS REQUIRED
- Check here if contact and applicant are same.

Applicant agrees to indemnify and save harmless the Fallbrook Union High School District (FUHSD), its officers, agents and employees, against any and all loss, damage and/or liability including but not limited to personal injury, bodily injury, accident, illness or death or any loss of damage to property and liability that may be suffered or incurred by the school district, its officers, agents and employees, and against any and all claims, demands, causes of action or credits, obligations, judgments, suits, attorneys' fees, costs and expenses that may be made or brought against the FUHSD, its officers, agents and employees, caused by, arising out of, or in any way connected with the use by applicant of FUHSD facility or the exercise of the privilege herein granted. Applicant further agrees to be the contact person to insure that his/her organization, promptly reimburses FUHSD for any damage sustained by the school premises, furniture or equipment because of the use or occupancy of said premises by his/her organization and to abide by and enforce the rules, regulations and policies of the Fallbrook Union School District governing the use of school facilities and equipment. According to the law of the State of California

Authorized Signature \_\_\_\_\_ Date: \_\_\_\_\_ I am authorized on behalf of the above named applicant/organization to sign this application for the use of FUHSD facilities and thereby obligate applicant for any fees and charges.

\_\_\_\_\_  
Name(print) Title/Position

**Approvals:**

Dir. Athletics \_\_\_\_\_ Date: \_\_\_\_\_  
 Dir. Performing Arts \_\_\_\_\_ Date: \_\_\_\_\_  
 Dir. Facilities \_\_\_\_\_ Date: \_\_\_\_\_

Dir. ASB \_\_\_\_\_ Date: \_\_\_\_\_  
 Dir. Food Ser. \_\_\_\_\_ Date: \_\_\_\_\_