## Community Relations

## Exhibit - Application and Procedures for Use of School Facilities

In be submitted to the Superintendent

This application must be approved before a non-school related group is allowed to use school facilities. School organizations, school-sponsored programs, and organizations whose primary purpose is to provide financial assistance to the school are all considered, for the purpose of this application, to be school-related. Use of school facilities for school purposes has precedence over all other uses.

IL <sub>/</sub> Bobcats	Brooks Middle School
signization Name	Requested School - acility
Jaime Castillo - Brooks SpEd Teacher	773-443-6399 - jcastillo@harvey152.org
Mentor Group through Basketball 90% students attend district 152	721 24 2017 - May 26, 2017 MWF 6pm-9pm
Program, Activity	Date(s) and starband fame(s)
NA	Basketballs
quipment needed	Materials to be brought into facility
NVA	NVA
Room arrangement, including decorations.	food service required

- 1. All non-school related groups must supply adequate supervision to ensure proper care and use of school facilities.
  - The non-school related group is responsible to the Board for the use and care of the school facility. All adult supervisors must have cell phones with them at all times.
  - Sufficient, competent adult supervision must be provided and the adult supervisor must ensure that no minor is left alone after the activity.
  - Only the cafeteria, auditorium, gymnasium, and athletic field, along with needed hallways and parking areas, are available for community use. Entering any room or area not in use by the group is prohibited. The adult supervisor will vacate the facility at the scheduled end time. Use of the school facility is not permitted past the agreed end time.
  - No furniture or equipment may be moved without prior approval from the Building Principal.
  - Signs, displays, or materials may not be attached, nailed, or otherwise affixed to walls.
    - JC Initial here if this is agreeable
- 2. All non-school related groups must agree to:
  Indemnify and hold harmless the District and its agents and employees for and from any and
  all loss including attorneys' fees, damages, expense, and liability arising out of its use of

Board Approved October 2012

	school property.
	<ul> <li>Pay any damages to school facilities, furniture, or equipment arising out of its use of school property whether such damage was accidental or deliberate. The cost of</li> </ul>
	damages will be based on the repair or replacement cost, the choice of which is at the School Board's discretion.
	<ul> <li>Supply proof of insurance naming [insert name of the District] as an additional</li> </ul>
	insured and verifying that the group maintains adequate insurance coverage against
	personal injury and/or property loss:
	Insurance provider name and contact number
	JC Initial here if this is agreeable
٠.	All non-school related groups must pay the following fees:
	Rental charge (unless waived by Board policy):
	Meal and beverage service (cost as determined by the cafeteria supervisor):
ŧ	JC Initial here if this is agreeable
4.	Payment Method: Check Money Order Credit Card
	It payment is by check, please make check payable to: The District
	If payment by credit card, please indicate the following:isaer CardAm Ex
	Expiration date: Credit Card No Today's date
	Authorized amount: Authorized signature:
Ä.	All non-school related groups must agree to use appropriate emergency procedures including
	calling 9-1-1 for medical emergencies and whenever an AED is used.
	JC Initial here if this is agreeable
Ó.	All non-school related groups must agree to follow the District's Plan for Responding to a
	Medical Emergency at a Physical Fitness I acility, 4:170-AP6. Important: The District will
	not supervise the activity nor will it supply trained AED users to act as emergency
	responders at any time, including during staffed business hours.
	Activity being proposed is not in a physical fitness facility.
	Initial here if this is agreeable
	Topy of the District's Plan for Responding to a Medical Emergency at a Physical Fitnes.
	Facility has been provided. (77 Ill.Admin.Code §§527.400(a) and 527.800(c). Important:
	State law encourages all non-District coaches, instructors, judges, referees, or other similarly
	situated non-District anticipated rescuers who use the physical fitness facility in conjunction with the supervision of physical fitness activities to complete a course of instruction that
	would qualify them as a trained AED user under III. law (410 II CS 4/10; 77 III.Admin.Code
	\$527.100).
	JC Initial here that a copy of the Plan was received and that the Applicant has read and
	understands the above note.
7	If the request involves a physical fitness facility, the non-school related group must:
	<ul> <li>Designate at least one adult supervisor who agrees to be an emergency responder. Al</li> </ul>
	ensurance responders are encouraged to be trained in CPR and trained AETI accore

o Give a copy of the District's plan for responding to medical emergencies to each

Require that 9-1-1 be called for medical emergencies and whenever an AED is used.
Ensure that each designated emergency responder knows the location of first aid

designated emergency responder.

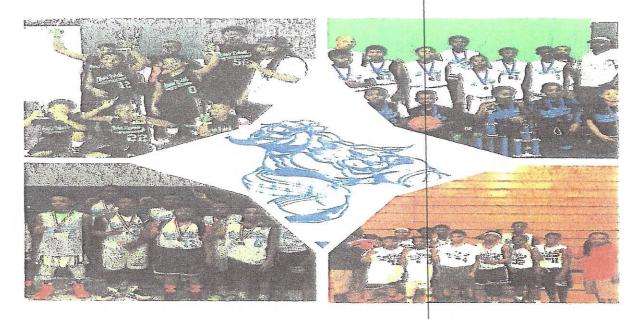
equipment and any AED.

- Ensure that only trained AFD users operate an AED, unless the circumstances do not allow time for a trained AED user to arrive.
- Arrange for at least one emergency responder to have a tour of the facility before the activity.
- Ensure that if an AED is used, the Superintendent is informed and all appropriate forms are completed.
   JC Initial here if this is agreeable

I certify that I am authorized to act for the above-named organization. I understand that:
(1) the granting of this request does not constitute recognition of my organization as a school-related group or activity, and (2) my organization may not represent itself or any of its activities as school-related.

I agree to: (1) abide by the conditions stated in this application, and (2) adhere to all Board policies and administrative procedures applicable to this use of the school's facility.

well as other criteri application, return	a decined important a copy of it to the period come Ruilding Princi	t. (Note to Superintenden person making the request vinal t	ng provided in this application as r approving or denying this in the central office, and send a
caps to me appropr	Francisco Contractor	7	
Approved	Denied		



The ILLINOIS BOBCATS is a non-profit tax exempt organization that effectively collaborates to provide quality programs that promote self-sufficiency and community growth for children, youth, families and seniors through our Family Services. Since 2005 the ILLINOIS BOBCATS have had a mission of forming collaborative implementations that address the factors evaluated within the Community Disadvantage Index (CDI). We recognize the need for self-worth, and self-respect in order to change these factors. We provide education, & and self-empowerment programs. We are a community service organization specializing in developing and administering high level programs. The Bobcats have been a benefit to the community by providing social skills, mentoring, and skill development.

Our most popular program is the Bobcat Basketball program. For the past few years we've assembled teams with players from the 151 & 152 School Districts we have been very successful. Our director, Mr. Jack Solomon, has coached in both districts. Taking District 151 downstate 3 times and finishing 3<sup>rd</sup> in 2001. He also coached in District 152 taking a 4<sup>th</sup> place finish downstate in 2005. He is dedicated to the area and has been helping youth for over 15 years in the area.

## Our programs:

<u>COUNSELING</u>-We provide counseling for all members of the family. The whole family can also benefit from our counseling services in a group forum.

<u>MENTORING</u>- Our mentoring program has help mode many young men and women on a successful path. Mentors works with counselors to provide the best possible treatment plan for a person's success.

<u>TUTORING</u>- We have a few tutoring programs which can provide the knowledge of one subject, or homework help for many subjects.

The Illinois Bobcats Youth Sports Programs provide structured skill training. We have year round programs for basketball and soccer ranging from camps, to travel teams. Check our event page or contact us by email or phone to get more information about the Bobcats Youth Sports Program. <a href="https://www.bobcatscommunity.com">www.bobcatscommunity.com</a> or 773-269-0691 \ Email: jack@bobcatscommunity.com

# VERIFICATION OF INSURANCE FOR THE AMATEUR ATHLETIC UNION OF THE U.S., INC. AND ITS MEMBER CLUBS

GENERAL INFORMATION

This document verifies insurance coverage for the Amateur Athletic Union of the United States, Inc. Member clubs have coverage as shown below from the date of enrollment and acceptance in the AAU. Expiration date is August 31st annually.

COVERAGE DATES:

03/29/2017 - 8/31/2017

This verification is issued as a matter of information only and confers no rights. This verification does not affirmatively or negatively amend, extend or alter the coverage afforded by the policies below. This verification of insurance does not constitute a contract between the issuing insurer (s), authorized representative or producer.

PRODUCER

Foy Insurance 64 Portsmouth Ave PO Box 1030 Exeter, NH 03833-1030 INSURED

Amateur Athletic Union of the U.S., Inc. Walt Disney World Resort

P.O. Box 10000 Lake Buena Vista, FL 32830-1000 (407) 934-7200 MEMBER CLUB INSURED

CLUB CODE:

WYT74E

The Bobcats P.O. Box 44

South Holland, IL 60473

Enrollment Date: 3/29/2017 11:07:00PM

### INSURER(S) AFFORDING COVERAGE

Company A United State Fire Insurance Company NAIC # 21113

Company B Everest National Insurance Company NAIC # 10120

\*For box below, INSR LTR refers to Company A or B.

COVERAGES - This is to certify that the policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions, and conditions of such policy(ies), limits shown may have been reduced by paid claims.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	COVERAGE EFF. DATE (MM/DD/YY)	COVERAGE EXP. DATE (MM/DD/YY)	COVERAGES	LIMITS
A	Participant Accident	US735234	9/01/2016 12:01 AM.	9/1/2017 12:01 AM.	Accident Medical Accidental Death and Dismemberment	50,000 20,000
В	Excess Liability	S18EX00142-161	9/01/2016 12:01 AM	9/1/2017 12:01 AM.	Each Occurrance Per Club Policy Aggregate Per Club	9,000,000 9,000,000
В	General Liability	S18ML00176-161	9/01/2016 12:01 AM	9/1/2017 12:01 AM	Each Occurrence Limit General Aggregate Limit Per Club Participant Legal Liability Personal and Advertising Injury Limit Products-Completed Operations Aggregate Fire Damage to premises Rented to You (Any One Premises) Medical Expenses Limit (Any One Person) Sexual Abuse Liability Sexual Abuse Aggregate	1,000,000 3,000,000 1,000,000 1,000,000 3,000,000 5,000 1,000,000 2,000,000

#### ADDITIONAL INFORMATION / RESTRICTIONS / SPECIAL ITEMS

For said club to have coverage, all membership requirements in the AAU must be met.

For said club to have Extended Coverage (AB) program, all membership requirements in the AAU AB program must be met.

CANCELLATION – Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. But, failure to mail such notices shall impose no obligation for liability of any kind upon the insurer, its agents or representatives.

REVOCATION OF MEMBERSHIP - will result in cancellation of coverage.

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