Community Relations

Exhibit - Application and Procedures for Use of School Facilities

To 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.

Heroes 4 Harvey	Brooks Jr. High
Organization Name	Requested School Facility 708-724-4159
$C \vdash T : \Lambda$	eda215@yahoo.com
Sgt. Eric Armstrong	Phono/email address Jan 11, 18, 25
Adult Supervisor from Organization (must be 21 years of age	Phone/email address Jun 11, 18, 25
or older)	Feb 1, 8, 22
Athletics	MARCH I
Program/Activity	Date(s) and start/end time(s)
N/A	Basketballs, cones, ropes
Equipment needed	Materials to be brought into facility
Gym	N/A
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.

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

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

school property.

- 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 damages will be based on the repair or replacement cost, the choice of which is at the School Board's discretion.
- Supply proof of insurance naming [insert name of the District] as an additional insured and verifying that the group maintains adequate insurance coverage against personal injury and/or property loss:

	Insurance provider name and contact number							
5000	Initial here if this is agreeable							
3.	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):							
	Initial here if this is agreeable							
4.	Payment Method: Check Money Order Credit Card							
	If payment is by check, please make check payable to: The District							
	If payment by credit card, please indicate the following:isaer Card							
	Am Ex							
	Expiration date: Credit Card No Today's date							
	Authorized amount: Authorized signature:							
5.	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.							
	Initial here if this is agreeable							
6.	All non-school related groups must agree to follow the District's Plan for Responding to a							
	Medical Emergency at a Physical Fitness Facility, 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							
	opy of the District's Plan for Responding to a Medical Emergency at a Physical Fitness							
	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 Ill. law (410 ILCS 4/10; 77 Ill.Admin.Code							
	§52 ₁ 7.100).							
	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:
 - Designate at least one adult supervisor who agrees to be an emergency responder. All
 emergency responders are encouraged to be trained in CPR and trained AED users.
 - Give a copy of the District's plan for responding to medical emergencies to each designated emergency responder.
 - 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 equipment and any AED.

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.

 All 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.

The Superintendent or designee will base his or her decision on the information being provided in this application as well as other criteria deemed important. (Note to Superintendent or designee: After approving or denying this application, return a copy of it to the person making the request, keep the original in the central office, and send a copy to the appropriate Building Principal.)

Approved

Denied

Procedures

	Group				
	1	2			
Multi-purpose (Lecture Hall, Cafeteria, and Media Center). Minimum of three hours after normal work hours only.	Free	\$17.50 Per Hour			
Each additional hour	Free	\$8.75 Per Hour			
Kitchen – refreshments set-up only	Free	\$12.50 Per Hour			
Gymnasium – Minimum of three hours after normal work hours only.	Free	\$25.00 Per Hour			
No spectators With spectators	Free	\$50.00 Per Hour			
Land facility use	Free	Free			
Overladial namina	(Applies to Groups 1 and 2)				

Custodial services

(Applies to Groups 1 and 2)
Current rate for building custodian to include benefits.

- Starting scale for regular hours rental is \$19.25 per hour (subject to annual increase).
- Starting scale for rental after normal work hours is \$28.75 (subject to annual increase).

AED Provider:

It is mandatory that District 152 arrange for a trained/certified AED provider be present at all times at the expense of the organization.

ACORD. CERTIFICATE OF LIABILITY INSURANCE							DATE	(MM/DD/YYYY) 2/2016	
THIS CERTIFICATE IS ISSUED AS A CERTIFICATE DOES NOT AFFIRMATIVE THIS CERTIFICATE OF INSURANCE REPRESENTATIVE OR PRODUCER, AN IMPORTANT: If the certificate holder is terms and conditions of the policy, certificate holder in lieu of such endors	E DOE ID THE (s an AD)	S N CERT DITIC	OT CONSTITUTE /	A CONT	RACT BETY	VEEN THE	ON THE CERTIFICATE E AFFORDED BY THE P ISSUING INSURER(S	HOLDER, THIS OLICIES BELOW,), AUTHORIZED	
certificate holder in lieu of such endors	ement(s),	a med tedrite vit en	uniselle	ni. A statem	ent on this	certificate does not cor	ifer rights to the	
Terry L Green & Associates				CONTACT NAME: Matt Gonglach					
3100 Five Forks Trickum Road				PHONE (A/C, No. Ext): (678) 205-8055 FAX (A/C, No): (678) 205-8045					
Ste 101 Lilburn, GA 30047	*********************			E-MAIL A	odress: Matte	DAYSAA.com		The second secon	
Heroes 4 Harvey/Meanstreets			The second secon	MSURER(5) AFFORDING COVERAGE				NAJC #	
16403 S. Emerald				INSURER	1 10001011211015	Mutual Insur	ance Company	23787	
Harvey, IL 60426				INSURER 8:					
A Member of the Sports, Leisure & Enterta	inment F	RPG		INSURER	Open comment of the second sec	and the second s	and a second of the second control of the se		
COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF NOTWITHSTANDING ANY REQUIREMENT, TO	CERTIFI	CATE	NUMBER: 65BIL03	0740.5	DELECTOR	NUMBER:	The second contract of the second	Name and the first of the second of the seco	
NOTWITHSTANDING ANY REQUIREMENT, TE SSUED OR MAY PERTAIN, THE INSURANCE SUCH FOLICIES. LIMITS SHOWN MAY HAVE INSTRUCTION TYPE OF INSURANCE A X COMMERCIAL GENERAL LIABILITY	ADDL 8	DUCE	Y THE POLICIES DESCR D BY PAID CLAIMS. POLICY HUMBER	agazzaran mendentakan b	POLICY EFF (MM/DD/YY)	POLICY EXP	TERMS, EXCLUSIONS AN	THEORE MAY BE	
CLAIMS MADE X OCCUR	X	And the state of t	68 RPG 000058718-00	TRACE OF THE PROPERTY OF THE P	03/03/2016 12:01 AM	03/03/2017 12:01 AM	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Es occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY	\$1,000,000 \$300,000 \$5,000	
POLICY PROJECT LOC		econd, recommend is a six byg sepp		The second secon		wordfelf () garagestales a Naviona	GENERAL AGGREGATE	\$1,000,000	
A AUTOMOBILE LIABILITY							PRODUCTS-COMP/OP AGG PROFESSIONAL LIABILITY LEGAL LIAB TO PARTICIPANTS	\$1,000,000 \$1,000,000 \$1,000,000	
ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS X Not provided while in Hawaii	manders of the contract contract of the contra	THE PROPERTY OF THE COURT OF THE PROPERTY OF T	68 RPG 000058718-00		03/03/2016 12:01 AM	03/03/2017 12:01 AM	COMBINED SINGLE LIMIT (Ea Accident) BOOLLY INJURY (Per person) BOOLLY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$1,000,000	
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION			darina mengelahan pangkan pang	1	and Andrew State Conference on the State Conference on		EACH OCCURRENCE AGGREGATE		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY AND PROPRIETOR/PARTNERV EXECUTIVE OFFICER/MEMBER EXCLUDED? [Mandatory in NH] If yos, describe under DESCRIPTION OF OPERATIONS	N/A	en e	and American company are actively aby the labor annual accessment to		n Principal Participant (Autoropy Conspication Services (Autoropy Conspication Services)		PER STATUTE OTHER EL EACH ACCIDENT EL DISEASE - EA EMPLOYEE		

EXCESS MEDICAL DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Legal Liability to Participants (LLP) limit is a per occurrence limit

Sport(s): Youth Basketball

Age(s): 13-15

The certificate holder is added as an additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured.

6B RPG 000058718-00

Membership ID: 6BBIL030948

CERTIFICATE HOLDER CANCELLATION

gwendolyn brooks middle school 14741 wallace

MEDICAL PAYMENTS FOR PARTICIPANTS

harvey, IL 60426

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

03/03/2017

EL DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT

\$25,000

PRIMARY MEDICAL

AUTHORIZED REPRESENTATIVE

03/03/2016

Stott further