

## Use of School Facilities Application

<b>Contact Person:</b>			
<b>Organization:</b>			
<b>Address:</b>			
<b>City/Town/Zip Code:</b>			
<b>Telephone:</b>		<b>Cell:</b>	
<b>E-mail</b>			

**Please answer ALL ELEVEN of the following questions to avoid delay in processing.**

<b>1. Area Requested:</b>			
<b>2. Purpose of use:</b>			
<b>3. Date(s) Requested:</b>			
<b>4. Time(s) Requested:</b>			
<b>5. Non-profit:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>6. Youth Group:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>7. In- District (Lowell, Dracut, Tyngsboro, Dunstable)</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
<b>8. Admission Charge:</b>			
<b>9. School Equipment Requested:</b>			
<b>10. Disposal of Proceeds:</b>			
<b>11. Expected Attendance:</b>			

The signing of this application shall constitute an agreement to abide by all the rules and regulations governing the use of school building and to accept full responsibility for any damage to or loss of school property.

### **RELEASE AND INDEMNITY AGREEMENT**

For and in consideration of the use of certain facilities of the Greater Lowell Regional Vocational Technical School District (hereinafter: The District) by me/us and/or by the organization I/we represent, I/we individually or on behalf of the organization I/we represent do hereby release acquit, discharge and covenant to hold harmless The District, its agents, servants, employees, committee members, officers and representatives of and from any and all actions, causes of action, claims demands, damages, costs, loss of services, expenses and compensation, on account of, or in any way growing out of any and all personal injuries (including death) and property damage which any and all persons may sustain at any time arising out of their presence upon any property owned and/or controlled by The District and/or out of any negligence of The District, its agents, servants, employees, committee members, officers and representatives, which presence arises directly or indirectly out of permission to use the District's facilities granted to me/us and /or to the organization I/we represent.

<b>→ Signature of Applicant</b>	<b>Date</b>
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<i>Office Use Only</i>		<b>FSD#</b>
Approved <input type="checkbox"/>	Police <input type="checkbox"/>	Rental Fee \$ _____ Insurance <input type="checkbox"/>
Not Approved <input type="checkbox"/>	Required <input type="checkbox"/>	Custodial Fee \$ _____ Payment Received <input type="checkbox"/>
Approved by: _____	TOTAL DUE	\$ _____ Date Received

This form should be completed and returned to:  
 Karen Weadick, Greater Lowell Technical High School,  
 250 Pawtucket Blvd. Tyngsboro, MA 01879, - (978) 441-4902, Fax (978) 441-5333  
[kweadick@gltech.org](mailto:kweadick@gltech.org)