

Application and Agreement for Use of District Property

***NOTE:** Please complete this form in duplicate and submit both copies to the School Principal for approval. If the application is approved, one (1) copy of the signed agreement will be returned to the using organization along with a contract prepared by the Board Attorney. The contract shall be signed by the designated representative of the using organization and returned to the School Principal. If the application is not approved, both copies will be returned.*

Name of Sponsoring Organization/Activity Hoops for Youth Telephone: 502.525.0120 G Goff	
Representative's Name Greg Goff	
Address 1465 Kings Ridge Road Carrollton, KY	
The above organization/individual requests the use of:	
<input type="checkbox"/> auditorium <input checked="" type="checkbox"/> gymnasium <input type="checkbox"/> dining room/kitchen <input type="checkbox"/> stadium	
<input type="checkbox"/> classroom(s) _____ <input type="checkbox"/> other, specify _____	
Is the organization planning to use District-owned equipment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, specify equipment _____	Operator's Name _____
Is the organization planning to conduct sales on school premises? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If yes, give a complete description of what is being sold and how the proceeds will be used. _____	
<hr/> Building/school/facility CCHS Gym, CCMS Gym or Cartmell Gym whichever is available and not in use	
Purpose Sunday Night Basketball League	
Date(s) requested 5/9/21	Time(s) Requested usually 7 pm
Will public be admitted?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Will advertisement(s) be used?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Will admission be charged?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

When using school facilities, this organization agrees to observe the following:

- To schedule with the building Principal the time(s) District property is to be used.** It is understood that the Superintendent/designee may cancel the use of the room or building at any time such use interferes with regular school activities.
- To be legally responsible for any and all damage to individuals and school equipment, building(s), grounds, or facilities, resulting from use by the organization.** To this end, the organization that is not school-related may be required to procure sufficient liability insurance to indemnify the Board, school officers, and employees for any injuries or property damage that might occur during the organization's use of the facilities. The Board shall require the renting organization to assume all liability for injury to individuals by reason of the lease of Board property and that the organization indemnify and save harmless the Board from any loss or damage thereby.
- To provide appropriate equipment for the use of District property.** When gymnasiums are used, the organization agrees to permit on the gym floor only those persons wearing shoes that will not mark the floor.
- To abide by the requirements of Board Policies 05.3 and 05.31 (see attached).** Disregard of the rules and regulations governing the use of the school buildings, equipment, and facilities shall result in the refusal of the Board to grant the offending organization further use.
- To acknowledge that approval of this request does not signify District sponsorship, endorsement or approval of your organization or the activity.


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FEE SCHEDULE

The organization agrees to pay the applicable fee(s) for the use of District facilities.

	# of Employees Required	# of Hours	Hourly Rate (Overtime at 1.5 times)	Total
Custodians				0.00
Food Service Employees				0.00
Supervisory Personnel				0.00
Other _____ _____				0.00
TOTAL PERSONNEL CHARGE				0.00

Property Used	Facility/ Equipment Fee	Personnel Cost, if applicable	Insurance cost, if applicable	Total Cost for Facility Use
Gymnasium at CCMS, CCHS or Cartmentt school	0.00	0.00	Provided	0.00
Auditorium at _____ school				
Cafeteria - <input type="checkbox"/> Dining Room <input type="checkbox"/> Kitchen <input type="checkbox"/> Both at _____ school				
Classroom(s) Number _____ at _____ school				
Stadium at _____ school				
Other Property at _____ school				



Signature - Representative of User Group

5/5/21

Date

Signature - Superintendent/designee

Date

IN THE EVENT SCHOOL IS CLOSED DUE TO WEATHER CONDITIONS, ALL SCHEDULED ACTIVITIES, WITH THE EXCEPTION OF DINNER MEETINGS, WILL BE CANCELED AND OPPORTUNITY TO RESCHEDULE OR REFUND USAGE FEE(S) WILL BE MADE.

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For Office Use Only—To Be Completed by School Official		
Cost for use of District property \$ _____	Cost for school employee \$ _____	Total cost \$ _____
Deposit \$ _____	Is deposit refundable? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Deposit Received _____	Balance Due \$ _____	
Board employee(s) assigned: _____		
Board Action Date, if applicable _____	Board Order # _____	

Review/Revised:7/21/11

INSURANCE COMPANY
6101 ANACAPRI BLVD., LANSING, MI 48917-3999

AGENCY INSURANCE ASSOCIATES INC
14-0176-00 MKT TERR 069 502-732-6653

INSURED HOOPS FOR YOUTH
C/O C/O GREG GOFF

ADDRESS PO BOX 514
CARROLLTON KY 41008-0514

TAILORED PROTECTION POLICY DECLARATIONS

New Business Effective 04-06-2021

POLICY NUMBER 212314-52158485-21

Company Use 52-23-KY-2104

Company Bill	Policy Term
	12:01 a.m. 12:01 a.m.
	04-06-2021 to 04-06-2022

55039 (11-87)

COMMON POLICY INFORMATION

Business Description: Mens Basketball Club

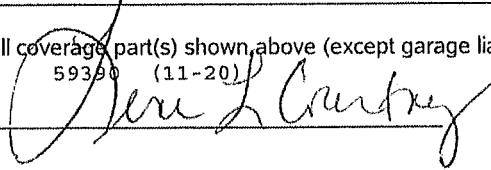
Entity: Nonprofit Organizati

	PREMIUM
THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PART(S):	
COMMERCIAL GENERAL LIABILITY COVERAGE	\$93.00
MINIMUM PREMIUM ADJUSTMENT (GL)	\$181.00
KENTUCKY TAX ON MIN PREM GL - CITY TAX CARROLLTON	\$14.48
KENTUCKY CITY/COUNTY TAX/COLLECTION FEE	\$8.55
KENTUCKY TAX COLLECTION FEE ON MIN PREM	\$2.17
KENTUCKY PREMIUM SURCHARGE	\$1.68
KENTUCKY PREMIUM SURCHARGE ON MINIMUM PREMIUM	\$3.26
TOTAL	\$304.14

THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.
Paid in Full Discount applies.
The Paid in Full Discount does not apply to fixed fees, statutory charges or minimum premiums.

Forms that apply to all coverage part(s) shown above (except garage liability, dealer's blanket, commercial automobile, if applicable):
55000 (07-12) 59390 (11-20)

Countersigned By:



Auto-Owners Ins. Co.

Issued 04-19-2021

AGENCY INSURANCE ASSOCIATES INC
14-0176-00 MKT TERR 069

Company POLICY NUMBER 212314-52158485-21
Bill 52-23-KY-2104

INSURED HOOPS FOR YOUTH

Term 04-06-2021 to 04-06-2022

55040 (11-87)

COMMERCIAL GENERAL LIABILITY COVERAGE

COVERAGE	LIMITS OF INSURANCE
General Aggregate (Other Than Products-Completed Operations)	\$2,000,000
Products-Completed Operations Aggregate	\$2,000,000
Personal And Advertising Injury	\$1,000,000
Each Occurrence	\$1,000,000
Damage to Premises Rented to You (Fire Damage)	\$50,000 Any One Premises
Medical Payments	\$5,000 Any One Person

Twice the "General Aggregate Limit", shown above, is provided at no additional charge for each 12 month period in accordance with form 55885.

AUDIT TYPE: Non-Audited

Forms that apply to this coverage:

59350 (01-15)	55405 (07-08)	55146 (06-04)	CG2106 (05-14)	CG2109 (06-15)
CG2002 (11-85)	IL0021 (07-02)	59325 (12-19)	CG0001 (04-13)	55513 (05-17)
IL0017 (11-85)	55029 (05-17)	CG2196 (03-05)	CG2132 (05-09)	IL0263 (01-91)
CG2147 (12-07)	55885 (05-17)	55916 (09-19)	59390 (11-20)	

LOCATION 0001 - BUILDING 0001

Location: 408 5Th St, Carrollton, KY 41008-1202

Territory: 003

County: Carroll

Municipality Code: 0039

CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Clubs - Civic, Service Or Social - No Buildings Or Premises Owned Or Leased Except For Office Purposes (Not-For Profit)	41670	Prem/Op Prod/Comp Op	Members	Each 1	
			20	1.514	\$30.00
			20	.074	\$1.00

COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0001 SUMMARY

	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 55405, 59390	INCLUDED
CITY TAX CARROLLTON	\$2.48
TAX COLLECTION FEE	\$0.37
KENTUCKY PREMIUM SURCHARGE	\$0.56
LOCATION 0001	\$34.41

LOCATION 0002 - BUILDING 0001

Location: 1706 Highland Ave, Carrollton, KY 41008-8775

Territory: 003

County: Carroll

Municipality Code: 0039

AGENCY INSURANCE ASSOCIATES INC
14-0176-00 MKT TERR 069

Company POLICY NUMBER 212314-52158485-21
Bill 52-23-KY-2104

INSURED HOOPS FOR YOUTH

Term 04-06-2021 to 04-06-2022

CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Clubs - Civic, Service Or Social - No Buildings Or Premises Owned Or Leased Except For Office Purposes (Not-For Profit)	41670	Prem/Op Prod/Comp Op	Members	Each 1	
			20	1.514	\$30.00
			20	.074	\$1.00

COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0002 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 55405, 59390	INCLUDED
CITY TAX CARROLLTON	\$2.48
TAX COLLECTION FEE	\$0.37
KENTUCKY PREMIUM SURCHARGE	\$0.56
LOCATION 0002	\$34.41

LOCATION 0003 - BUILDING 0001

Location: 1708 Highland Ave, Carrollton, KY 41008-8775

Territory: 003

County: Carroll

Municipality Code: 0039

CLASSIFICATION	CODE	SUBLINE	PREMIUM BASIS	RATE	PREMIUM
Clubs - Civic, Service Or Social - No Buildings Or Premises Owned Or Leased Except For Office Purposes (Not-For Profit)	41670	Prem/Op Prod/Comp Op	Members	Each 1	
			20	1.514	\$30.00
			20	.074	\$1.00

COMMERCIAL GENERAL LIABILITY COVERAGE - LOCATION 0003 SUMMARY	PREMIUM
TERRORISM - CERTIFIED ACTS SEE FORM: 59350, 55405, 59390	INCLUDED
CITY TAX CARROLLTON	\$2.48
TAX COLLECTION FEE	\$0.37
KENTUCKY PREMIUM SURCHARGE	\$0.56
LOCATION 0003	\$34.41