



BUILDING USE APPLICATION
 Bellevue School District
 12037 NE 5th Street, Bellevue, WA 98005; 425-456-4500

APPLICATION NO.
 72419

INSTRUCTIONS: PLEASE PRINT. The applicant is to complete PART I ONLY. The facility scheduler will insert all estimated costs based on the applicant's classification and information provided. For further information, refer to Policy 9500 and Procedures 9500.1, 9500.3 and/or 9500.4.

PART I - APPLICANT INFORMATION

No. _____ Organization to be Invoiced: Flevers
 Responsible Person/Department: Jamie Noll
 Billing Address: _____
 E-mail Address: _____ Phone(Day) _____
 School/Location Requested: Interlake Commons
 Rooms Needed: (attach list if needed) _____
 Dates: (attach list w/times if more than 10 days) 3/9/13
 Day(s) of the Week: (circle all that apply) M T W TH F SA SU
 Non-Profit? YES/NO; Please provide Non-Profit # see charge below
 Time Entering Building: 7:30 Time Leaving Building: 12:00
 Primary Use: ADULT/YOUTH Food Being Served? YES/NO Anticipated Attendance: _____
 Event Start Time: 8:00 pm Event End Time: 11:00

Description of Event:

T.O.L.O

FEES: A \$20.00 non-refundable processing fee must accompany this application. Facility Scheduler has copies of the current fee schedule, or one may be obtained on-line. Information may also be obtained from the Facilities Office. Checks shall be made payable to Bellevue School District NO. 405. Please indicate the name of the location requested and application number on your check. School activities have preference over community use.
INSURANCE: Applicants agree by their signature below to hold the Bellevue School District harmless as a result of their use. Prior to application approval, users may also be required to supply a certificate of insurance with a reputable insurance firm, indicating full liability coverage of at least \$1 million combined single limit bodily injury and property damage (with the Bellevue School District listed as an additional insured). *Insurance is required for use of all Performing Arts Centers (PAC).* **CANCELLATIONS:** Procedure 9500.1, sections 2.II and 2.II, outlines the cancellation procedure for the applicants. Section 7.0 outlines cancellation procedure for the District. Additional cancellation information for PACs' is located in Procedure 9500.4, Section 3.0. PAC cancellations must be made at least 30 days prior to scheduled event. If not cancelled before the 30 days, customer could be invoiced for, up to half of the original estimate. Exceptions to the District cancellation procedure include power outages or closure due to inclement weather conditions as determined by school officials. **SCHOOL HOLIDAYS:** School facilities are not available for community use during school hours. Facility or PAC rental on holidays is contingent upon staff availability and must be predetermined. **AGREEMENT:** Applicant agrees by their signature below that they have read and agree to the terms and conditions stated above and/or on the reverse side of this application (or second page of electronic application) and with the District's Procedures 9500.1, 9500.3, and/or 9500.4. Approval by the District will be indicated by the issuance of this BUILDING USE APPLICATION, which has been signed by all parties.

ACCEPTANCE OF TERMS: X Jamie Noll TODAY'S DATE: X 3/8/13
 APPLICANT SIGNATURE

Credit Card Payment Information

Name on Credit Card: _____ Credit Card #: _____ Exp. Date: _____ Verification Code: _____
 Credit Card Mailing Address: _____ City: _____ State: _____ Zip: _____
 I hereby authorize Bellevue School District to charge my VISA or MasterCard \$ _____ Signature: _____ Date: _____

FACILITIES USE ONLY: PART II - FEES ESTIMATE

Calendared by School or District? (circle applicable option)	CLASSIFICATION: (circle one)	1	2	3	4	Certificate of Insurance received	YES / NO
<input type="checkbox"/> Charge staffing fees to department/club	<input type="checkbox"/> Charge staffing fees to ASB					Non-refundable Processing Fee: \$20.00	<input type="checkbox"/> Cash/Check <input type="checkbox"/> POS
Facility Fee: <u>X</u> Room(s) <u>Commons</u>	<u>X</u> <u>5.5</u>	<u>X</u>				<u>see below</u>	<u>✓</u>
Season/Session: <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring	# rooms	# hours	rate	# days			
<input type="checkbox"/> Performing Arts Center (PAC)	# rooms	# hours	rate	# days			
Supervision: <input type="checkbox"/> Site <input type="checkbox"/> School Tech* <input type="checkbox"/> Other	# hours	# hours	rate	# days			
Supervision is required for all PAC events in their entirety + 1 hour	# hours	# hours	rate	# days			
Technician: <input type="checkbox"/> Type: _____	# Techs	# hours	rate per tech	# days			<u>✓</u>
Custodial*: <input type="checkbox"/> M-F <input checked="" type="checkbox"/> Weekend	# hours	# hours	rate	# days			
*For PAC Minimum 2 hrs. <u>Minimum Entire event +3 hours</u>	# hours / each	# hours / each	rate	# days			
Other (specify): _____	# hours / each	# hours / each	rate	# days			
Other (specify): _____	# hours / each	# hours / each	rate	# days			
Other (specify): _____	# hours / each	# hours / each	rate	# days			
COMMENTS:	<u>ASB charged to 054422</u>						

SPECIAL INSTRUCTIONS: Room Fees waived for Wednesday PM After School Programs
 School Signature: Jamie Noll Date: 3/7/13
 Check#: _____ Check Amount: _____ POS Receipt No. _____
 Date: _____
 Facility Use Approval (Indicates event has been approved by the District)