

KENAI PENINSULA BOROUGH SCHOOL DISTRICT

E 1330(b-1)

COMMUNITY USE OF SCHOOL FACILITY

The purpose of this form is to allow communities without organized community activities to use KPBSD facilities with attached E 1330(b-2) waiver of liability for the district.

School: _____

Use of: _____
(Part of Building: gym, classroom, etc.)

Activity: _____

By whom: _____

Date and time: _____
(Please be specific)

Responsible Party: _____

I agree to obtain signatures of all participants on the Community Use Waiver of Liability and provide the originals **prior** to building use to the school administrator or principal. Last minute drop-ins will not be allowed.

KEYS

A key to the building (# _____) has been issued to the responsible party (above) on the date of _____ strictly for purposes of facilitating the above named activity. The key is to be returned to the principal on _____. It is the responsible party's responsibility to assure that all doors and windows are locked, and lights and appliances are turned off when departing the building. The duplication of school keys is prohibited. The person issued the key shall be responsible for its safekeeping. If lost, the responsible party shall report the loss to the principal immediately and shall pay a \$300 fee.

Printed Name (Responsible Party)

Signature Date

Principal Date

Assistant Superintendent of Instructional Support Date

KENAI PENINSULA BOROUGH SCHOOL DISTRICT

COMMUNITY USE WAIVER OF LIABILITY

School: _____

Use of: _____
(Part of Building: gym, classroom, etc.)

Activity: _____

To the maximum extent allowed by law, I agree to defend, indemnify, and hold harmless the Kenai Peninsula Borough and School District and its employees, directors, designees and all those affiliated with the above named activity for expenses relating to injuries, accidents, property damage, property lost and/or stolen as a result of using District facilities for recreation as a part of a community group.

I understand that the Kenai Peninsula Borough and the School District provide neither medical insurance coverage nor liability insurance that would cover such actions. It will be my responsibility to provide for payment of such expenses should they occur. In signing this release, I am stating that I am aware of the inherent dangers involved in recreational sports.

Print name (of participant): _____

Signature: _____ Date: _____

Signature of parent or guardian if a minor: _____