

# BILOXI PUBLIC SCHOOLS FACILITIES AGREEMENT

Please complete this form and return to Biloxi Public Schools, Office of the Personnel Director, P.O. Box 168, Biloxi, Ms 39533 (228-374-1810)

You will be notified as to the action of the Board of Trustees.

NAME OF ORGANIZATION REQUESTING USE OF FACILITIES	
NAME, ADDRESS, & PHONE OF INDIVIDUAL COMPLETING APPLICATION	
SPECIFIC FACILITIES REQUESTED	
REASON FOR REQUEST (USE)	
DATE/S FACILITIES NEEDED	
TIME/S FACILITIES NEEDED	

The \_\_\_\_\_ does hereby assume any and all liability for any personal injury to individuals or property damage to furniture, fixtures, classrooms, auditoriums, or any other facilities used by said organization as a meeting place located in the public school buildings which are the property of Biloxi Public School District of Biloxi, Harrison County. The organization further agrees to pay promptly, on demand, for any damage caused by any member of said organization occupying any said facilities with the consent of the Board of Trustees of the Biloxi Public School District of Biloxi, Harrison County, MS. Said organization also agrees to purchase and deliver proof of liability insurance (minimum liability policy of one million dollars, \$1,000,000) to the Office of the Personnel Director prior to the facility request being presented to the School Board of Trustees and prior to use of any facility (including practice and/or performance). Please remember that all school facilities/schools are 'TOBACCO FREE'. Said organization understands that alcohol/drug use, firearms or fireworks are prohibited in school buildings or on school property. Organizations using any school facility shall be required to provide police and fireman, at the organization's expense, to be present at all times during the use of the facility. Lighting and sound systems are the responsibility of the organization. The undersigned does hereby represent that he/she has full authority to bind said organization to this indemnity agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MAKE CHECKS PAYABLE TO BILOXI PUBLIC SCHOOL DISTRICT AND MAIL OR DELIVER TO-- OFFICE OF THE PERSONNEL DIRECTOR, P.O. BOX 168, BILOXI, MS 39533  
TOTAL FEES WILL BE EQUAL TO THE BASE FEES PLUS ADDITIONAL FEES. ALL FEES ARE DUE PRIOR TO USE OF FACILITY.

## FEE CALCULATIONS

				Normal	Government	
				Rate	Rate	
<b>DEPOSIT</b>	<small>ONE TIME REFUNDABLE FEE</small>			\$500	\$500	=
<b>BJHS AUDITORIUM</b>	<small>No Food or Drinks</small>	<b>NUMBER OF DAYS</b>	___ x	\$650	\$325	=
<b>BHS Lecture Hall</b>	<small>No Food or Drinks</small>	<b>NUMBER OF DAYS</b>	___ x	\$500	\$250	=
<b>BHS Competition Gym</b>	<small>No Food or Drinks</small>	<b>NUMBER OF DAYS</b>	___ x	\$650	\$325	=
<i>Lighting and Sound System are not provided.</i>						
<b>GYMNASIUM</b>	<small>No Food or Drinks</small>	<b>NUMBER OF DAYS</b>	___ x	\$400	\$250	=
<b>CAFETERIA</b>		<b>NUMBER OF DAYS</b>	___ x	\$400	\$200	=
<b>ADDITIONAL ROOMS</b>	<small>(up to 4)</small>	<b>NUMBER OF DAYS</b>	___ x	\$250	\$100	=
<b>FOOTBALL STADIUM (w/ lights)</b>		<b>NUMBER OF DAYS</b>	___ x	\$400	\$200	=
<b>FOOTBALL STADIUM (w/o lights)</b>		<b>NUMBER OF DAYS</b>	___ x	\$200	\$100	=
<b>BASEBALL/SOFTBALL STADIUM (w/ lights)</b>		<b>NUMBER OF DAYS</b>	___ x	\$200	\$100	=
<b>BASEBALL/SOFTBALL STADIUM (w/o lights)</b>		<b>NUMBER OF DAYS</b>	___ x	\$100	\$50	=
<b>GYMNATORIUM</b>	<small>No Food or Drinks</small>	<b>NUMBER OF DAYS</b>	___ x	\$300	\$150	=
<b>PIANO</b>		<b>NUMBER OF DAYS</b>	___ x	\$400	\$400	=

## TOTAL FEES\*\*

The Biloxi Board of Trustees held it's meeting on \_\_\_\_\_. Your request for the use of school facilities was

APPROVED

DISAPPROVED

If approved, please contact us upon receipt of this letter so that final preparations can be completed and to notify staff of your program.

Director of Personnel:

Date: