

ORLAND SCHOOL DISTRICT 135
Application/Contract for Use of District Facilities

**THIS CONTRACT MUST BE PRESENTED TO THE
NIGHT CUSTODIAN EACH TIME THE ACTIVITY ARRIVES AT THE BUILDING**
A \$25.00 fee will be assessed for no shows in Group I and II WITHOUT 48 hour cancellation notice (708-364-3354)

PLEASE PRINT

Organization Requesting Use of Facilities Village of Orlando Park

Authorized Representative GEORGE KOZWARA

Representative's Title Village Manager

Mailing Address 14700 RAMONA AVE.

City/State/Zip ORLAND PARK

email address G.KOZWARA@ORLANDPARK.ORG

Business Phone (708) 403-6151

Event Supervisor RAY PATTONI

Home and/or Cell Phone (708) 772-5391

Business Phone (708) 403-6283

Insurance Company THE HORTON GROUP Policy Period _____
(Attach Certificate of Insurance naming Orland School District 135 as the Additional Insured)

Facility Requested OSH Area(s) Requested SEE ATTACHED

Date(s) Requested SATURDAY AUGUST 1 (KIDS DAY)
SUNDAY AUGUST 2 (CAR SHOW)

Time facility to be reserved 6:00 am/pm to 5:00 am/pm (we will add prep/cleanup time)

Expected Attendance 200/day Age Group ALL No. of Adult Supervisors MIN 10

Special arrangements or custodial setup requested NONE

The above listed Organization/Authorized Representative and Event Supervisor have read the Orland School District 135 Use of Facilities Handbook and, by signing this application, agree to abide by all rules and regulations specified within. In addition, I/we do hereby stipulate and agree to indemnify and hold harmless School District 135, in whole or in part, with respect to any claims and expenses incurred by reason of any claims, for personal injury or property damage arising in connection with the use by such organization of the facilities of said School District 135, and shall, if required by the Board of Education of said School District, obtain public liability insurance.

Authorized Representative Signature [Signature]

Date 2-24-20

FOR DISTRICT OFFICE USE ONLY

Facility Use	_____	Approved	_____	Denied
Equipment Use	_____	Approved	_____	Denied
Custodial Time	_____	am / pm	_____	am / pm (prep and clean up time)
Fee to be assessed	\$ _____			due one week prior to building use

Special Remarks _____

Authorized Signatures

Superintendent/Designee _____

Date _____

Director, Buildings and Grounds _____

Date _____

White - Admin Copy

Canary - Building Copy

Pink - Applicant Copy