

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 RAHWIA 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 (KIDZ 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