Lincoln Public Schools 1624 Lonsdale Avenue Lincoln, RI 02865

Lincoln, RI 02865 401-721-3300 www.lincolnps.org For Office Use Only Account is current Tyes No FEE: _____ Approval _____ Date Approved:_____ APPLICATION FOR USE OF SCHOOL BUILDINGS **Contact Information (Please Print)** Group/Individual Requesting Use: Contact Person: Street Address: City: State: Zip Code: _____ Daytime Phone: _____ Evening Phone: _____ Fax: _____ E-mail: Activity/Event Description Purpose of Event:___ l l_{No} Expected Attendance: Yes No Has this activity previously been held at a Lincoln Public Schools facility? If yes, give approximate date and location of previous event: $| |_{No}$ If yes, admission charge: \$_____ Yes Is this event a fundraising activity? If yes, explain: _____ Is this a commercial (for-profit) event? Yes ∐ No If yes, explain: Select Facility, Area & Equipment, Obtain Signatures Date(s) Requested: ___ Times: from _____a.m./p.m. to_____ ___a.m./p.m. Wednesday Thursday Day(s) (Please Circle): Sunday Monday Tuesday Friday Saturday Facility Requested: Equipment needed: Area Requested: ☐ Central Elementary Auditorium (LHS & LMS ONLY) For Office Use Only: Lighting **Custodial Hours:** ☐ Cafeteria (LHS & LMS ONLY) Lonsdale Elementary Microphone From: ____a.m./p.m. ☐ Podium ☐ Northern Elementary ☐ Multi-purpose room To: a.m./p.m. ☐ Saylesville Elementary (Elementary ONLY) ☐ P.A. System Classroom ☐ Sound Lincoln Middle School Lincoln High School ☐ Classroom (air-conditioned) ☐ Other_____ Gym (LHS & LMS ONLY) Kitchen

Date

Building Principal Signature to Acknowledge Availability

next

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Obtain Fire/Police Protection

Your organization must contact your local fire district/police station directly to determine if coverage is necessary, and to schedule that coverage as required. Payment for these services is the responsibility of the individual/group requesting use of the building. Obtain signatures from these authorities to confirm you have completed this step in the process. Police coverage required & obtained Fire coverage required & obtained Police coverage not required Fire coverage not required Signature of Police Department Signature of Fire Department Date Date **Additional Documentation** If this activity is a fundraiser and/or requires a flyer to be distributed, these permissions must be obtained from the Superintendent prior to submitting this application. Copy of approval(s) must be included in this packet. **Submit Complete Application Packet** Must be submitted at least 20 days prior to activity or event. A complete packet includes: Signed Applications Payment (if applicable) by check made payable to Lincoln School Department Certificate of Insurance naming Lincoln Public Schools as an additional insured with a minimum of \$200,000 coverage for property damage, \$1,000,000 per occurrence with a \$3,000,000 annual aggregate for liability and \$10,000 for medical payments liability. Additional documentation as necessary. All additional documentation associated with this event (flyer distribution approval, fundraising permission, etc.) must be pre-approved by the Office of the Superintendent. Requestor Signature This permit is requested under the policies of the Lincoln School Committee and I agree to become responsible for any damage to buildings, grounds and/or equipment. Signature: Date of Application: Please note: The requestor will receive a copy of this application after it is fully approved by the Office of the Superintendent. Any changes must be submitted in writing and will affect processing time. Mail Complete Packet to: **Lincoln Public Schools Operations Department** Date Stamp Received by Superintendent's Office 1624 Lonsdale Avenue Lincoln, RI 02865