

NORWICH PUBLIC SCHOOLS  
FACILITIES USE PERMIT 2016-2017

Group/Individual Name: \_\_\_\_\_

Organizations Full Address/Phone Number \_\_\_\_\_

Contact Person & Title: \_\_\_\_\_ Phone Number \_\_\_\_\_

Contact Persons Address: \_\_\_\_\_

Alternative Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

School/Area Requested: \_\_\_\_\_

Date(s)/ (Day(s): \_\_\_\_\_ Time(s) \_\_\_\_\_

Statement of Purpose: \_\_\_\_\_

Are Admissions, gate charges or donations collected for this activity? Y or N. If "Y" how much per person \_\_\_\_\_ any revenue producing activity will be charged fees based on the attached schedule.

**Conditions of Use**

The group/individual named above assumes financial responsibility for any damage to school property or injury to persons resulting from use. Only the facilities specifically listed in this permit may be used and the grantee's responsible representative will see to it that other portions of the building are not entered by those under his/her charge. A walkthrough of the facility to be used will occur both before and after the event with renters and building staff to see that the building is left in good condition before leaving. **A Certificate of Insurance for personal injury and property damage Single Limit Liability of \$1,000.000 must be provided with Norwich Public Schools named as an additional insured before the event. We also require payment before the use of facility.** All activities are expected to be run in an orderly fashion. Smoking, drinking, eating, littering or using illegal substances is not allowed.

Special Requirements/Equipment to be used during rental: \_\_\_\_\_

This permit is effective only for the dates, hours and locations specified above. It is subject to revocation by the Norwich Public Schools if, in its judgment the grantee has not complied with the terms of the permit or the grantee's use of the school facilities has proven to be detrimental to the district, its facilities, or any persons.

Terms accepted by:  
\_\_\_\_\_

Permit Issued by:  
\_\_\_\_\_

Grantee or Grantee's Representative

Authorized Representative (Grantor) of NPS

**Please return to: Deb LaChance, Facilities Dept. 526 East Main Street, Norwich, Ct 06360**

**860-859-5015 Ext. 2144 Fax 860-892-4369**