



DUXBURY PUBLIC SCHOOLS

Duxbury Public Schools
93 Chandler Street, Duxbury, Massachusetts 02332
Tel: (781) 934-7600 • Fax: (781) 934-7644
District website • www.duxbury.k12.ma.us
Twitter: @duxbury_ps • Facebook: Duxbury Public Schools

Duxbury Public Schools Facilities and Field Use Form

Organization Name: _____

Event Name: _____

Type of Organization: Profit Non-Profit **Type of Event:** Practice Game Meeting

Contact Name (Include Title): _____

Billing Address: _____

Contact Email: _____ **Contact Phone:** _____

Facility/Field/Rooms Requested: _____ **Date/Time:** _____

Facility/Field/Rooms Requested: _____ **Date/Time:** _____

Facility/Field/Rooms Requested: _____ **Date/Time:** _____

Equipment Needs: _____

Special Requests: _____

The Applicant by his/her signature below affirms that he/she has read all the rules and regulations pertaining to the rental of the school property and is familiar with them, and further, agrees that he/she shall accept the rental of the property subject to all the regulations imposed. The use of all school facilities will be at the discretion of the Superintendent of Schools or designee. The appropriateness of the activity will always adhere to the proper use of a school building and/or grounds, as detailed in School Committee policies KF, KF-R. The applicant also understands that permission to use the school property shall be withdrawn immediately if the School Superintendent or designee feels that the rules and regulations have been violated in any way. In the event of conflicting applications, the Duxbury Schools, sports and clubs will take priority for booking.

A rate of \$ _____ has been agreed upon for your event and will be billed accordingly.

Signature _____ Date _____

Office Use Only

Checklist:

Certificate of Insurance _____

(Holder must be Town of Duxbury, Insurance coverage min \$200,000 property, \$1,000,000 injury/death of one person, \$2,000,000 injury/death resulting in one occurrence)

501(c)3 Documentation (if applicable) _____

Check all applicable charges:

Classroom _____
Cafeteria _____
DHS Presentation Hall _____
Custodian Fee _____

Audio Visual _____
Turf Field _____
Turf Lights _____

Gym Rental _____
Grass Fields _____
Steele Restroom _____

Athletic Director Signature: _____ **Date:** _____