



Holly Area Community Connection

Richard Kinnamon, Director
Karl Richter Community Center
920 Baird St, Holly, MI 48442
248.328.3199(O) 248.245.9053(M) community.connection@hask12.org

Facility Use Form

Organization Name _____

Address _____

APT/STE: _____

City _____

State _____

Zip _____

Contact Person _____

Email: _____

Daytime Phone # _____

Mobile Phone # _____

Classification: III Private/For Profit II Non-Profit II Boy/Girl Scouts Other (Clarify): _____

Name of Event: _____

Event Description: _____

Building: Karl Richter Campus Holly High School Sherman Middle School Holly Elementary Patterson Elementary Davisburg Elementary Rose Pioneer Elementary

Rooms: Gym Cafeteria/Commons Auditorium Kitchen Library/Media Center Kiva Classroom #: _____ Field: _____

Dates Requested: _____

Event Start Time: AM PM Event End Time: AM PM

Setup Start Time: AM PM Breakdown End Time: AM PM

Other Needs: _____

Please use additional page for multiple dates/rooms

**PLEASE ALLOW FIFTEEN (15) DAYS FOR PROCESSING
DO NOT ATTEMPT TO USE FACILITIES WITHOUT AN APPROVED CONFIRMATION**

I do hereby certify, in representation of the above-named group, that I have read and will observe all procedures, guidelines and restrictions in the Holly Area Schools Use of Facilities Regulations. I understand that, by law and Board policy, alcohol and controlled substances are forbidden on school premises and smoking is not allowed in the buildings or on the grounds and that abuse of this will cause eviction and loss of facility use. **I further understand that I am responsible for any damage that can be attributed to my/our use.** I agree and abide by these conditions. I understand I am responsible for providing proof of insurance one week prior to the event.

To the fullest extent permitted by law, the user agrees to defend, pay in behalf of, and hold harmless the Holly Area Schools, 920 Baird Street, Holly, Michigan, 48442, its elected and appointed officials, employees, volunteers and others working in behalf of the Holly Area School District against any and all claims, demands, suits, losses, attorney fees, including all costs connected therewith, for any damages which may be asserted, claimed or recovered against or from the Holly Area School District, by reason of personal injury, including bodily injury and death, and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with the facility use described above.

Applicant's Signature _____ Date _____

Multiple Dates/Rooms

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