



Fairfax
County
Public
Schools

APPLICATION FOR COMMUNITY USE OF SCHOOL FACILITIES AND GROUNDS

APPLICATION FEE MUST BE SUBMITTED ALONG WITH APPLICATION FOR APPROVAL. ALL INFORMATION MUST BE FURNISHED BEFORE APPLICATION CAN BE PROCESSED. FEES MUST BE PAID TEN WORKING DAYS PRIOR TO SCHEDULED EVENT. MAKE CHECK PAYABLE TO THE SCHOOL. APPLICATION MUST BE FILED WITH THE SCHOOL PRINCIPAL NOT LESS THAN 16 WORKING DAYS BEFORE INTENDED USE.

1. School Requested (Name) Hayfield Secondary School
 2. Activity Date(s) Building to be Open Building Closed
9/29/07 am 1:00 pm am 5:00 pm
11/11/07 am 1:00 pm am 5:00 pm
 3. Individual/Organization Northern Virginia Junior Catholic Youth Organization

Tennis c/o Mimi Sullivan
 Address 939 N. Livingston St Arlington VA 22205
 (street) (county/city) (state) (zip code)
 Phone (202)345-9138
 (office) (home)

4. Type of Activity Tennis matches for Elementary school students
 5. Will you attend? Yes No If no, who will be in charge?

6. Name of Chaperones (one required for each 25 children) who have agreed to supervise this activity (list two):
 Name Team Coaches Phone No. _____
 Name _____ Phone No. _____

7. Is organization a nonprofit type? Yes No
 8. Is there a third-party contract/arrangement with a profit-making individual/organization?
 Yes No
 Name of Third-Party Individual/Organization _____

9. Does the user collect fees?
 Admission: Adults \$ _____ Children \$ _____ Couples \$ _____
 Dues: Monthly \$ _____ Annual \$ _____
 Donations: \$ _____ Advertisement \$ _____
 Others (specify) \$ _____

10. NUMBER OF PEOPLE PROJECTED TO ATTEND: 30

11. Requirements (specify):

RENTAL	PERSONNEL	SPECIAL EQUIPMENT & SERVICES NEEDED
Auditorium	Activities Supv.	
Cafeteria	Athletic Event Worker	
Cafeteria w/Kitchen	Cafeteria Staff	
Classroom(s)	Custodian	
Gymnasium	Faculty Supv.	
Other	Financial Clerk	
	Maintenance Technician	
	Secretary	
	Sound Tech.	
	Student Tech.	

12. Addendum Attached? Yes No

13. Comments Team coaches will be present in every match. Matches are Every Sunday from Sep 23rd - Nov 11th from 1:00-5:00PM. Six(6) courts

The undersigned agrees to pay applicable fees above and certifies that he or she is familiar with, and will abide by, current FCPS Regulations 8420, Community Use of School Facilities, and the Regulations Governing Use of School Facilities listed on the reverse side of this application form. The undersigned shall be liable for any and all claims or damages resulting from use of the school facility, including but not limited to damage to School Board property by the user, and costs, fees and damages resulting from the user's failure to comply with any federal, state or local law, regulation or other requirement. The undersigned shall ensure the prompt and proper adjustment of all such claims.

Mr. Mimi Sullivan League Co-Commissioner 7/25/07
 (Submitted By) (position) (date)

*Not applicable for individuals
 Note: When schools are closed because of inclement weather, all facilities use is cancelled.
 Users are responsible for notifying their membership.

****For Office Use Only**** CALCULATION OF FEES BY SCHOOL PERSONNEL

1. RENTAL

	No.	X Hrs.	X Fee	= \$
a. Auditorium				0.00
b. Cafeteria				0.00
c. Cafeteria w/Kitchen				0.00
d. Classroom(s)				0.00
e. Gymnasium				0.00
f. Other				0.00
Subtotal \$				0.00

2. PERSONNEL

a. Activities Supervisor				0.00
b. Athletic Event Worker				0.00
c. Cafeteria Staff				0.00
d. Custodian				0.00
e. Faculty Supervisor				0.00
f. Financial Clerk				0.00
g. Maintenance Technician				0.00
h. Secretary				0.00
i. Sound Technician				0.00
j. Student Technician				0.00
k. Other				0.00
Subtotal \$				0.00

3. SPECIAL FEES

a.				0.00
b.				0.00
c.				0.00
d.				0.00
Subtotal \$				0.00
Total \$				0.00

Late payment penalty fee 10% \$ 0.00
 Attorney fee for collection 25% \$ 0.00

4. Application Fee? Yes No \$10.00

5. IRS Letter Submitted? Yes No Total \$ 10.00

6. Liability Insurance Policy? Yes No

Comments: NVJCYO Liability insurance certificate is covered by group insurance from Catholic Diocese of Arlington. File copy with Fairfax County Risk Management.

OFFICE USE	
Approved: _____	Disapproved: _____
Signature of Principal _____	Date _____
Approved: _____	Disapproved: _____
Signature Community and Pupil Services _____	Date _____
Approved: _____	Disapproved: _____
Signature Community and Pupil Services _____	Date _____
Approved: _____	Disapproved: _____
Signature Community and Pupil Services _____	Date _____
Approved: _____	Disapproved: _____
Signature Community and Pupil Services _____	Date _____