

# West Central School Corporation

1850 S. US 421  
P.O. Box 578  
Francesville, IN 47946

“Encourage Every Student Every Day” \*Engage \*Empower \*Educate

Phone 219-567-9161  
Fax 219-567-9761

## West Central School Corporation Facility Usage Contract

Organization requesting building use: \_\_\_\_\_

Name of representative of organization: \_\_\_\_\_

Representative's address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Facilities requested (select all that apply):

Elementary Gym	Elementary Cafeteria	Pool -Please use pool rental form
Middle School Gym	High School Cafeteria	Other _____
High School Gym	Above room with Kitchen Access	

What will occur as part of the event? \_\_\_\_\_

Date(s) of event: \_\_\_\_\_ Time of the event: \_\_\_\_\_ Number of event participants: \_\_\_\_\_

Equipment required for event: \_\_\_\_\_

Agreement:

1. Any organized group renting the facilities will be required to present proof of insurance and a list of participants to the Athletic Director upon request.
2. All applicable fees will be charged to the organization based on the schedule listed below.
3. Neither the West Central School Corporation, the School Board, nor the personnel of the school shall be held liable for any injuries to any person or persons contracting the use of the school facilities. The renter agrees to indemnify and hold harmless the West Central School Corporation except in cases of negligence on the part of the West Central School Corporation or its agents or employees.
4. I.C. 34-31-10-11 – Warning. Under Indiana law, a school is not liable for an injury to, or the death of, a participant in physical fitness activities at this location if the death or injury results from the inherent risks of the physical fitness activity. Inherent risks of physical fitness activities include risks of injury inherent in exercise, the nature of a sport, the use of exercise equipment, or the use of a facility provided by a school. Inherent risks also include the potential that you may act in a negligent manner that may contribute to your injury or death, or that other participants may act in a manner that may result in injury or death to you. You are assuming the risk of participating in this physical fitness activity.
5. Organizations agree its signatory representative will be present during the dates and hours of usage and will be responsible for damage to school property and facilities. Furthermore, designated representatives are

responsibility for reporting damaged or lost of school property immediately to West Central Administration at 219-567-9161 ext. 4 or [central\\_office@wcsc.k12.in.us](mailto:central_office@wcsc.k12.in.us).

6. Clean-up is the responsibility of the renter except sweeping. If a custodian has to clean up debris, rubbish, or other refuse afterward, additional hours will be charged to the renter.
7. Organizations must agree to abide by the rules and regulations of the pool and all other West Central rules including the prohibition of the possession of tobacco products, vaping products, and alcohol.

Signature of Representative of Organization: \_\_\_\_\_ Date: \_\_\_\_\_

*Please fill out this form and submit it to the above address or email the form to [central\\_office@wcsc.k12.in.us](mailto:central_office@wcsc.k12.in.us). Once we have it, a representative of West Central will contact you for further details.*

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**To Be Completed by Central Office Staff**

Door access needed \_\_\_\_\_

Time doors need to be opened \_\_\_\_\_ Time doors need to be closed \_\_\_\_\_

Equipment needed \_\_\_\_\_  
\_\_\_\_\_

Other pertinent information \_\_\_\_\_  
\_\_\_\_\_

*Upon completion and signature, submit to the District Athletic Director/Activities Director*

Signature of Athletic Director: \_\_\_\_\_ Date: \_\_\_\_\_

*Upon verification of facility availability, send to the appropriate Building Principal*

Signature of Building Principal: \_\_\_\_\_ Date: \_\_\_\_\_

*Upon verification of facility availability, send to the Superintendent*

Signature of Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_

*Once the Superintendent has verified the organization and agrees to the facility usage, copies of the completed form will be sent to the following:*

*Representative of the Organization  
Building Principal (and secretaries)  
Athletic Director  
Director of Maintenance  
Technology Director  
Pool Director – If applicable  
Food Services Manager – If applicable*

**Facility Usage Fees (Subject to Change)**

Gym Rental Hours/Fees

\$50.00 per hour (this fee is waived if a majority of participants are West Central athletes)

Equipment Fees

Please contact Central Office for specific equipment rental fees.

Building Rental Hours/Fees (minimum of 2 hours)

\$20.00 per hour

Custodian and Cook Fees (minimum of 2 hours)

Mon.-Fri.	\$16.25 per hour or 1.5 x the worker's hourly wage
Saturday	\$24.38 per hour or 1.5 x the worker's hourly wage
Sunday & Holidays	\$32.50 per hour or 2 x the worker's hourly wage

\*\* Plus the employer's share of FICA & PRF

*In compliance with the Fair Labor Standards Act (FLSA), the federal minimum wage and overtime law, employees working more than 40 hours per week will be compensated at 1.5 times their hourly rate or according to the guidelines to the left, whichever is greater.*

**Statement of Charges: To be completed by Central Office**

Rental Fee for Building:	\$ _____
Custodial Fee:	\$ _____
Other Equipment/Services:	\$ _____
Cooks (if applicable):	\$ _____
Supervision (Custodial or Lifeguard):	\$ _____
<b>Total:</b>	<b>\$ _____</b>

***Upon receipt of final billing, please make all checks payable to West Central School Corporation unless otherwise notified.***