

CAPE CORAL CHARTER SCHOOL AUTHORITY FACILITY RENTAL REQUEST

Name of Renter:			Primary Contact:			
Renter's Address:			Phone #:			
_			Email:			
School Being Rente	d:		Category:(lis	ted in Facility Rental Guideline	 s)	
Date of Rental:			Expected # of A	Attendees:		
Reoccurrin	ng during 2016-17 sc	hool year? If	yes, a schedule of da	tes must be attached		
Description of Activ	vity:		·			
Rental time should		ed doors/gate	•	T (8) HOURS. the hours of the event. Rental Time: Start: End:		PM PM
#2 – Facility:				Rental Time: Start:		PM
Additional Support:	(please circle all rec	ղuests)		End:	AM	PM
Staff members	Score Board O	perator	Special Set-up	Extra Custodial		
during facility renta				olunteers must be present at A		
	il. Fees for custodian lity Rental Guideline		staff, special setups, e	etc. Will be added into rental co		es
Are you a governme	lity Rental Guideline		staff, special setups, e	etc. Will be added into rental co		es

Insurance must be provided by <u>all</u> renters, and a certificate of insurance must be submitted with Rental Agreement acceptance. Please refer to the facility rental guidelines for rental requirements.

- -Insurance must, clearly identifying the Cape Coral Charter School Authority **and** City of Cape Coral as the additional insured, with minimum limits of liability insurance of \$1,000,000 per occurrence and \$2,000,000 annual aggregate.
- -Renter is required to comply with Cape Coral Charter School Authority guidelines and is financially responsible for missing items and/or damage to equipment and facilities resulting from the above rental.

Once this form has been submitted to the Charter School Bookkeeper, and fees have been calculated a rental agreement will be forwarded along with all required documents. Receipt of a rental agreement is NOT binding until dates are confirmed and appropriate school authorizations are obtained.

Submit request via email to Penny.Faulkner@capecharterschools.org