

MAXWELL UNIFIED SCHOOL DISTRICT
REQUEST FOR USE OF SCHOOL DISTRICT FACILITIES

STATEMENT OF INFORMATION

The undersigned states that, to the best of his knowledge, the school property for use of which application is hereby made will not be used for the commission of any act intended to further any program or movement the purpose of which is to accomplish the overthrow of the government of the United States by force, violence or other unlawful means.

That _____, the organization on whose behalf he is making application for school property does not, to the best of his or her knowledge, advocate the overthrow of the government of the United States or of the State of California by force, violence or other unlawful means, and that to the best of his or her knowledge, it is not a Communist action organization or communist front organization required by law to be registered with the Attorney General of the United States.

This statement is made this _____ day of _____, _____, under penalty of perjury.

(Signature of Applicant)

USE OF SCHOOL DISTRICT FACILITIES INSURANCE REQUIREMENTS

1. During the entire term of use of school facilities, applicant is required to maintain in effect at its own cost and expense, a policy or policies of comprehensive general liability insurance, including coverage of owned, non-owned and hired automobiles, providing a minimum combined single limit coverage of \$300,000 for "Low Hazard" events and \$1,000,000 for "High Hazard" events for defense of lawsuits and the payment of damages arising from bodily injury, sickness or disease, and death to any person; and property loss, damage and destruction for each accident or occurrence. The insurance coverage shall provide that the insurance carrier or its representative shall process and respond to all claims from acts of Applicant's employees and agents, and shall provide legal counsel for the defense of lawsuits. Joint Power Agreements may have separate liability limits.
2. Applicant shall cause Maxwell Unified School District, its officers, employees, agents and governing board to be named as additional insured in the above insurance policies, and provide a certificate of insurance as evidence of the above insurance coverage. **The certificate of insurance shall be delivered to the District Office, 515Oak Street, P.O. Box 788, Maxwell, CA 95955, prior to the actual commencement of facility use.** The certificate shall contain a provision that the District shall be given written notice 30 calendar days in advance of cancellation or any material change in the insurance policies of Applicant.
3. Applicant shall, at its own cost and expense, maintain Worker's Compensation insurance coverage for its employees including volunteer employees under the State Worker's Compensation Insurance Law.