

**OUTSIDE USER POLICY:
APPLICATION FOR USE OF SCHOOL FACILITIES – PART 2**



**** 7% Retail Sales Tax (RST) is applicable to insurance contracts therefore must be added to the premiums indicated below**

PLEASE PRINT

School Division/District: _____ School: _____

APPLICANT: _____ Name of Contact Person: _____

Address: _____ Postal Code: _____ Telephone: _____

Time of Use applied for: From: _____ AM PM Date: _____ To: _____ AM PM Date: _____

Particulars of Activity: _____

Number of Participants Expected: _____ Approximate age of participants ("adults" or "children"): _____

Name of Supervisors: _____ Telephone: _____

Requirements: (Facilities/equipment)

Gymnasium Music room Classroom # _____ Shops Theatre Multi-purpose room Soccer/baseball field

Other: _____

Type and Quantity of Equipment, if required: _____

Fees:

- 1. Use of Facilities \$ _____
- 2. Use of Equipment \$ _____
- 3. Caretaker \$ _____
- 4. Security \$ _____
- 5. Liability Insurance Prem. (from chart at right) \$ _____
- 6. Retail Sales Tax (7%) \$ _____
- 7. Other – described below \$ _____
- 8. TOTAL \$ _____

OUTSIDE USER LIABILITY INSURANCE RATES - \$2,000,000 COMMERCIAL GENERAL LIABILITY				
SPORTS	Number of Participants	Premium *		
		One Day	Two Days	Seasonal
Badminton, Dance Lessons, Horseshoes, Tennis	1-25	\$25	\$50	\$75
	26-100	\$50	\$100	\$150
	101-250	\$75	\$150	\$225
	Over 250	Refer	Refer	Refer
Baseball, Basketball, Field Hockey, Floor Hockey, Handball, Racquetball, Soccer, Squash, Softball, Volleyball, Swimming with Lifeguard, Non-Contact Touch/Flag Football, Track & Field	1-25	\$50	\$75	\$150
	26-100	\$100	\$150	\$300
	101-250	\$150	\$225	\$450
	Over 250	Refer	Refer	Refer
Recreational Non-Contact Ball Hockey	Pick-up	\$50	\$75	\$100
	Max 30	Refer	Refer	Refer
MEETINGS & OTHER EVENTS	Number of Participants	Premium *		
		Day	2-3 Days	Over 3 Days of Seasonal
No Alcohol Example: Arts & Crafts, Bridge, Sewing Groups, Church Meetings, Rummage Sales, Prenatal Classes, Seniors Group Meetings, Family Reunions, Teas, Homecomings, Birthday and Anniversary Parties	1-25	\$25	\$50	\$75
	26-100	\$50	\$100	\$150
	101-250	\$100	\$200	\$300
	251-500	\$150	\$300	\$500
With Alcohol – add to the above premiums:	Over 500	Refer	Refer	Refer
	1-25	\$75	\$150	\$225
	26-500	\$125	\$250	\$375
	Over 500	Refer	Refer	Refer

Activities Not Listed - Contact Sara Solleveld at HUB International Manitoba
Phone: 1-204-888-8374

Other terms or conditions: _____

This is to certify that I (My organization), while occupying said facilities, will provide and be responsible for adequate adult supervision and the security of school property and will abide by all rules and regulations as established by the school and/or DIVISION. I (we) agree to pay for any damages incurred to property and/or equipment and to pay rental fees as outlined. The permit holder (user group) will protect, indemnify and hold harmless the School Division and its agents from all claims for damages that may arise out of the use of buildings or grounds by the permit holder. If liability insurance premium is not indicated above, the permit holder (user group), agrees to obtain his/their own liability insurance for this event.

Dated this _____ day of _____ 20____ Signed (Contact person): _____

Permit approved by (Facility/Property Designate): _____ Date Issued (d/m/yr): ____/____/____

If insurance is applied for above, submit this form to HUB International Manitoba, Attention: Sara Solleveld at sara.solleveld@hubinternational.com. Your School Division office will be invoiced the premium.