# Application for Use of FTCSC Facility

## Director of Business and Operations

**6141 S. Franklin Road Indianapolis, IN 46259**

**317-862-2411 317-803-5094 Fax**

**All information on this application must be completed and signed to be approved.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Organization | | | | | **Billing Address of Organization** | | **Email Address** | |
| **Name of Representative/Applicant** | | | | | **City, Zip** | | **Phone Number(s)**  **(h)**  **(c)** | |
| **BUILDING REQUESTED:** | | **NO. OF PERSONS EXPECTED:** | | | **ORGANIZATION TYPE:**  **School Affiliated ⬜**  **Not for Profit ⬜**  **For Profit ⬜** | | | |
| **DESCRIPTION OF EVENT:** | | | | | | | | |
|  | Date of Event | | | Event Begin/Set-up Time | | | | Event End/Tear-down Time |
| **Monday** |  | | |  | | | |  |
| **Tuesday** |  | | |  | | | |  |
| **Wednesday** |  | | |  | | | |  |
| **Thursday** |  | | |  | | | |  |
| **Friday** |  | | |  | | | |  |
| **Saturday** |  | | |  | | | |  |
| **Sunday** |  | | |  | | | |  |
| Special Instructions: | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Requested Facility: Please check appropriate box | | | | | | | | | | | | | | | **⬜ Elem Gym** | **$15.00/hr** | | | **⬜ MS/Kitley Gym** | | **$20.00/hr** | **⬜ HS Auditorium** | | | **$75.00/hr** | **⬜ HS Café** | **$25.00/hr** | | | **⬜ Elem Café** | **$15.00/hr** | | | **⬜Annex Café** | **$20.00/hr** | | **⬜ HS Gym** | **$50.00/hr** | | | **⬜ FA Café** | **$25.00/hr** | | | **⬜ Elem LGI Room** | | | **$10.00/hr** | **⬜MS/Kitley Café $20.00/hr** | | | **⬜ HS Aux Gym** | **$35.00/hr** | | | **⬜ FA LGI Room** | | **$10.00/hr** | | **⬜ Annex Gym** | | | **$20.00/hr** | **⬜Annex Classroom $10.00/hr** | | | **⬜ HS Stadium** | **$200.00/day** | | | **⬜ FA Gym** | | **$35.00/hr** | | **⬜ Annex Aux Gym** | | **$20.00/hr** | | **⬜Annex Band Room $20.00/hr** | | | **⬜ HS LGI Room** | | **$10.00/hr** | | **⬜ HS Track** | **$200.00/day** | |  Personnel Costs Cost for Custodian is $40.00 per hour per custodian two (2) hour minimum  Cost for Security is $50.00 per hour per officer two (2) hour minimum and may be required for groups in excess of one hundred (100)  **Cost for the Auditorium Director at Franklin Central High School (all events) is $35.00 per hour for the entire event**  ***Additional time with additional charges may be needed based on the condition of the facility after departure to return the facility to school readiness.*** | | | | | | | | |
| Equipment Rental Elementary & Middle School   **Sound $25.00/per use ⬜**  LCD Projector 25.00/per use ⬜  **Computer Use 25.00/per use ⬜** | | | High School **Lighting $100.00/per use ⬜**  **Sound 100.00/per use ­­­⬜**  **LCD Projector 25.00/per use ⬜**  **Computer Use 25.00/per use ⬜** | | | **Estimated Total** Custodial $\_\_\_\_\_\_\_\_\_\_\_\_\_Security $\_\_\_\_\_\_\_\_\_\_\_\_\_ **Rental $\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Other $\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Grand Total: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **The final charge may be more or less depending upon actual services used. School affiliated groups may have rental fee waived with proper permission.** | | | | | | | | |
| **I have read, understand and agree to abide by all PROCEDURES, RULES AND REGULATIONS AND INSURANCES REQUIRED, AS SPECIFIED.**  **I certify I am authorized to sign this application.**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature of Applicant Date** | | | | | | | | |
| FOR OFFICE USE ONLY  **Certificate of Insurance Received and on File Yes \_\_\_\_\_ No\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Approval of Building Principal Date Approval of Director of Operations Date**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Entered in FS Direct by Date** | | | | | | | | |

##### Revised December, 2017