



**Athens Performing Arts Center
Facility Use Application**

Date of Request: _____

Facility Use Details:

Official Name of Applicant Organization: _____

Organization Address: _____

Organization Authorized Representative Name & Title: _____

Telephone Number: _____

Proposed Use by Applicant: _____

Name of Event: _____

Date(s) Requested: _____

Event Time(s): _____

* Times must include pre-event preparation access until when the event ends and all clean-up activities have concluded. A School Designee must be on site at all times when property is used by the Applicant and when open to the public. During regular operating school days, Applicant may enter the premises no earlier than 3:30 PM due to classes.

In the event this Facility Use Application is approved by the Board, the Applicant agrees it will:

1. Enter into the Athens Performing Arts Center Facility Use Agreement with Athens City Schools which outlines rights, privileges, responsibilities and user fees associated with the requested facility.
2. Execute all releases of liabilities required by the Board in connection with the Applicant's use

of the premises herein applied for

3. Provide proof of certificate of liability insurance coverage as required by the Athens Performing Arts Center Facility Use Agreement.
4. Submit a deposit (to be determined) to secure the date(s) on the APAC Calendar.

For Athens City Schools Use:

Approvals:

_____	_____
Dr. Rick Carter, Executive Principal	Date

_____	_____
Serena Owsley, Assistant Superintendent	Date

_____	_____
Dr. W.L. Holladay, Superintendent	Date

_____	_____
Board Action Taken	Date