

Group's/Organization's Agreement

As the officially designated Contact Person for the group/organization named above, I understand that failing to comply with Katy ISD reservations guidelines and restrictions may result in the loss of future facility use privileges. Upon completion of the consultation session and determination of the technical services necessary for the event, I understand that an estimated cost of the event will be determined and communicated to me as the Contact Person for the group/organization. A deposit, proof of insurance, and proof of nonprofit status, if applicable, are required along with this application. The estimated cost for rental (including costs for technicians, custodians, etc.) must be paid at least two (2) weeks in advance of the event. I also understand that the group/organization will be responsible for the replacement/repair of any equipment due to accidents, misuse, neglect, and/or vandalism on the part of any individual associated with the group/organization. I have read and understand the Katy ISD reservations guidelines and restrictions and will abide by and help in the enforcement of said guidelines/restrictions.

By signature on this agreement, leasor acknowledges and agrees that:

1. Use of the facility requested will be restricted to individuals associated with their organization in order to maintain security.
2. Use or possession of any weapon, alcohol or tobacco products on any Katy ISD property is prohibited.
3. Use or possession or storage of any pesticide or herbicide on any Katy ISD property is prohibited. Possession or improper application of pesticides may result in forfeiture of current utilization and future use of school facilities.

Contact Person's/Sponsor's Signature	Date
--------------------------------------	------

FOR OFFICE USE ONLY				
KISD Event Coordinator			Phone	Fax
Date Received	Classification Type	Date Insurance Received	Date Deposit Received	Payment Due