



**NORTHVIEW PUBLIC SCHOOLS  
FACILITY USE APPLICATION**

**Please review the *Facility Use Guidelines* and *Facility Use Fee Schedule* before submitting this application.**

**Description of Activity** (separate applications required for differing activities) \_\_\_\_\_

**Building and Area requested** \_\_\_\_\_

Group A – Wildcats

Group C - NV/Non-NV Groups or Non-Profit Groups

Group B - Northview Community Groups

Group D - Private Citizens or Commercial Groups

<b>Requested Date(s) of Use</b>	Days/Weeks (Circle all that apply):	M	TU	W	TH	F	SA	SU
Start date: _____	End date: _____							
Hours (Including set-up) From: _____ am/pm	To: _____ am/pm							
Estimated # of adults attending: _____	Estimated # of students attending: _____							
Total estimation of attendees will determine custodial and managerial needs/costs as indicated on the Facility Use Fee Schedule.								

PLEASE note **SPECIFIC equipment and set-up arrangements** necessary for your program and/or event \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For large events, custodial staff will be hired for all facilities. Additionally, a Facility Manager may be hired for high school facilities.  
An estimate of these rates will be included in your initial invoice with the balance being charged upon completion of your event.

Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

Applicant and all participants are familiar with and will abide by NVPS School Board Policies and Facility Use Guidelines.  
In consideration for the opportunity of the above stated facility use, I hereby release Northview Public School (NVPS) including but not limited to all elected and appointed officials, employees and volunteers of the Northview Public Schools (NVPS) from any and all liability for any injury or damages whatsoever arising from participation in this program/event(s) at Northview Public School facilities. I agree to provide NVPS with a *Certificate of Insurance* and/or *Release of Liability Waivers* from each participant of the above stated rental when required, and submit said signed agreements to the NVPS Community Education Office before my first rental date. In understand that failure to adhere to these requirements will cancel this application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Application can be mailed or dropped off to the Northview Community Education office, 4561 Hunsberger Ave NE, Grand Rapids, MI 49525  
NORTHVIEW PUBLIC SCHOOLS reserves the right to cancel this application for any reason.*



For Office Use Only



Building approval \_\_\_\_\_ Date \_\_\_\_\_ Com. Ed. final approval date \_\_\_\_\_

Initial of personnel responsible for collection of the following: Fee \_\_\_\_\_ Certificate of Insurance \_\_\_\_\_ HH Agreements \_\_\_\_\_

**Original:** Community Education Department

**Copies:** Building Principal/Athletic Office/Aquatic Center Office; Custodial; Applicant