APPLICATION FOR USE OF INGERSOLL FACILITIES NONS PROFIT VENDOR SPACE

Facilities and Operations Office, Room 300 111 Bethel Street NE, Olympia, Washington 98506

Name of Organization		Date:
Name of Applicant		Title
Address of Applicant		Day Phone:: Evening Phone: Cell Phone:
		Cell Filolie.
Date(s) Requested: Month Date(s)	Time Requester	d _ to
Month Date(s)	From	to
Month Date(s)	From	to
Description/Purpose of Activity: No food or beverages may be sold	\$5 per table pe	# needed
	Invoice will be mailed after facility use	
I is agreed that this application is made subject to District Policy 4260 and Procedure 4260P for the use of school facilities. The undersigned agrees that OSD rules and regulations shall be strictly observed and accepts the entire responsibility for their enforcement. I hereby certify, on behalf of my organization, that shall be personally and severally responsible for any and all damage or unnecessary abuse of school buildings, grounds, or equipment growing out of occupancy of said premises by our organization We agree to abide by and enforce the rules and regulations of the Olympia School District governing the non-school use of buildings, grounds, and equipment. We hereby agree to hold the Olympia School District harmless for any claims arising on the premises at the time of our occupancy of same or arising out of the event held by us. We further agree that the organization will not discriminate against any person on the basis of sex, in the operation, and administration of our program.		
Signature of Applicant	Date	
Signature of Ingersoll Administrator	Date	
Signature of Assistant Superintendent or Designee	Date	
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