

No Change

Building, Collin

Excluded Dates

APPLICATION FOR USE OF SCHOOL FACILITIES
 Omaha Public Schools – Department of District Operational Services
 3215 Cuming Street Omaha, Nebraska 68131-2024
 Phone: 531-299-9835 FAX: 531-299-0412

8-30-21
9-20-21
9-27-21

APPLICATIONS WILL BE APPROVED OR DENIED AND NOTICE SENT TO APPLICANT AND SCHOOL PRINCIPAL. APPLICATIONS MUST BE RECEIVED BY THE DEPARTMENT OF DISTRICT OPERATIONAL SERVICES AT LEAST FIVE (5) WORKING DAYS PRIOR TO PROPOSED BUILDING USE DATE. SCHOOL DISTRICT RESERVES THE RIGHT TO APPROVE OR DENY THIS APPLICATION IN ACCORDANCE WITH APPLICABLE SCHOOL DISTRICT POLICY, REGULATIONS, PRACTICES AND PROCEDURES.

INSTRUCTIONS:

- A. Fill out blanks completely or XX blanks which do not apply to your request. An incomplete form may be rejected.
- B. Obtain building principal's approval for use of the facility on specified date(s).
- C. Send completed application to Department of District Operational Services (address listed above).
- D. Questions regarding the application should be directed to the address and phone extension listed at the top of this page.

***** PERMIT IS GOOD FOR CURRENT SCHOOL YEAR ONLY ***** NO SMOKING OR ALCOHOL PERMITTED *****

1. Official Name of Organization Impact Soccer Club-Majestic Youth Adult Both
 402
 2. Proposed Use: Soccer practice Date of Application 8/11/2021
 3. School to be Used South High 6:00-8:00 PM Hours of Day 6:00 PMam/pm (to) 8:00 PMm
(Includes Setup and Takedown Time)

NOTE: Custodial pay is based on 1/2 hour before and after time shown above plus any additional time needed for setup and clean up.

4. Space to be Used Collins Field Size of Group 20 girls
 5. Date(s) to be Used Mondays Only, Starting August 16th through November 1st, 2021 Excluded Dates
(Day(s) of week and date(s))
8-30-21, 9-20-31, 9-27-31
(In case of series of meetings, specify all dates.)

6. Price of Admission: No Yes If yes \$ _____
 7a. Special Equipment (Audio Visual): No Yes
 If Yes, explain _____
 7b. Room Set-up Required: No Yes
 If Yes, explain _____
 8. Refreshments to be served: No Yes
 If Yes, explain _____

(There will be a fee if kitchen facilities are needed.)

Commercial General Liability Policy

A certificate of insurance with a minimum combined single limit for bodily injury and property damage of \$1,000,000 must be provided to the Department of District Operational Services before use of the facility. Omaha Public Schools must be named as the Additional Insured for General Liability.

NOTE: Additional terms and conditions of the Application are printed on the reverse side of this application. You should read these carefully. Your signature on this Application signifies that you have read all instructions and will guarantee adherence to the rules and regulations for the above group.

Applicant Authorized Representative (Print Name) Nikki Baits (Signature) Nikki Baits

Applicant Address 5101 South 17th Zip Code 68005 Applicant Phone 4026186471

Applicant Email _____ Alternative Phone _____

Building Principal's Signature 

NOTE: OPS SCHOOLS AND DEPARTMENTS MUST COMPLETE THE CODING BELOW IN THE EVENT CHARGES OCCUR.

Fund Code: _____ Program: _____ Department: _____
 Class Field: _____ Account: _____ Project/Grant: _____

DO NOT WRITE IN THIS SPACE. FOR DEPARTMENT OF DISTRICT OPERATIONAL SERVICES USE ONLY

CHARGES:
 Rental – Performance _____ Custodial Services _____
 – Rehearsal _____ Stage Manager _____
 Security Services _____ Other _____
 TOTAL _____ APPROVED: _____