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APPLICATION TO USE PUBLIC FACILITIES - **\$10** fee for application (Application only-not a permit until approved)

Dr. Martin Luther King Jr. Elementary and Jesse Sanchez Elementary

SCHOOL

Parking Lot

BUILDING

A. Application

1. Name of Applicant County of Monterey

2. Address of Applicant 1441 Schilling Place, South Bldg, 2nd Floor, Salinas CA 93901

Name

3. Applicant Representative Michael R. Derr, EOC Logistics Chief

4. Equipment and other needs None

| (Number of tables, AV | V equipment, bl | lackboard, etc.) | |
|-----------------------|-----------------|------------------|--|
| | | | |

| DATE (S) OF USE | DAY OF USE | PERSON IN CHARGE | DESCRIPTION OF ACTIVITY | ESTIMATED ATTENDANCE | TIME IN | TIME OUT |
|--|------------|-----------------------------|----------------------------|-------------------------|---------|----------|
| 3/28/21 | Sunday | Nick Steller (831-755-4796) | COVID-19 Vaccinations | 600 | 7:00 am | 5:00 pm |
| 4/18/21 | Sunday | Nick Steller (831-755-4796) | COVID-19 Vaccinations | 600 | 7:00 am | 5:00 pm |
| | | | | | | |
| (If more space is needed, please attach a sheet) | | | | | | |

B. DECLARATION OF APPLICANT

1. Nature or type of intended use: COVID-19 mass vaccination site.

- Applicant has received or will receive for the activities herein listed contributions, cash collections, registration fees, admission fees, tuition, donations, or other receipts estimated to amount to \$0_____. If no receipts anticipated for these activities, check here _____.
- 3. Receipts set forth in item 2 above, will be used for <u>N/A</u>
- 4. Applicant hereby agrees to hold the Alisal Union School District, the Board of Trustees, the individual members thereof, and all District Officers, Agents and Employees free and harmless from any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use/or occupancy of facilities. Applicant agrees to furnish such liability or other insurance for the protection of the public and the lesser as the Alisal Union School District may require.
- 5. I, the undersigned, hereby certify that the applicant will be responsible for any damages sustained by the building, furniture, equipment, or grounds occurring through the occupancy or use of said building and/or grounds by the applicant, normal wear and tear accepted.
- 6. I hereby certify that I have received and read the rules, regulations, conditions, and terms including those on the reverse side of this application and that I and the applicant, whom I represent, will abide by them and will conform to all applicable provisions of the Constitution and laws of California and to all other rules and regulations of the Board of Trustees and its authorized agents which may be communicated to the applicant.
- 7. It is agreed that in the event this permit is cancelled by the applicant, no refund will be made and that changes in date or extension of time shall be made only as specified by the rules governing use of facilities.
- 8. In executing this declaration, I certify that I have been duly authorized by the herein set forth applicant to act on its behalf in making application for use of said facilities.
- 9. The undersigned states that to the best of knowledge, the property for use of which application is hereby made will not be used for the commission of any intention to further any program or movement the purpose of which is to accomplish the overthrow of the Government of the United States by force, violence or other unlawful means, and that, to the best of knowledge, it is not a communist-action organization or communist-front organization required by law to be registered with the Attorney General of the United States.
- 10. I understand that the facilities are not approved for use until an approved copy is returned to me.

| Signature of Applicant Representative_ | Docusigned by: Michael Derr | | |
|--|--------------------------------|-------------------|---|
| Address 1488 Schilling Place, Salinas CA 93901 | <u> </u> | none 831-917-5805 | Date 3/17/21 |
| C. RECOMMENDATIONS/APPROVALS (| Do Not Write Below This L | ine) | |
| CHARGES (please X) | Yes N | lo × | |
| Staff Representative | hrs x | per hr = | This Facility Use is Noted Not Approved |
| Food Services Worker | hrs x | per hr = $\$$ | Principal |
| Custodian | hrs x | per hr = $\$$ | 1 |
| Equipment Operator | hrs x | per hr $=$ | |
| Others | hrs x | per hr $=$ § | This Facility Use is Noted Not Approved |
| Use Fees | hrs x | per hr $=$ § | Director of MOTS |
| Total Fee | | \$ | |

Approved if Signed Associate Superintendent

Terms: Fee payable seven days prior to use

| Payments: Payable to Alis | sal Union School Dist | rict. Failure | to comply with the te | rms will be cause | to deny permission. | |
|---------------------------|-----------------------|---------------|-----------------------|-------------------|---------------------|---|
| Permit to use granted on | (Date) | | | | | |
| Insurance required \$ | P.L. \$ | _ P.D. \$ | Fee \$ | Deposit \$ | Balance Due \$ | |
| White/Business | Pink/Fiscal | | Goldenrod/School | | Canary/Applicant | i |

ALISAL UNION SCHOOL DISTRICT 155 Bardin Road SALINAS, CA 93905 (831) 753-5700

Title

- A. I understand that an approved application does not constitute a binding contract between the organization and the Alisal Union School District. Should serious needs of the Alisal Union School District require the facility, the applicant will be notified.
- B. I agree to cancel my reservation as soon as possible by telephone (831) 753-5700 if a change in plan eliminates the need for use of facilities.
- C. I agree to assume responsibility to insure that both participants and spectators do not:
 - 1. Move furniture
 - 2. Use equipment unless authorized
 - 3. Place any substance on the floor
 - 4. Use other than assigned space
 - 5. Use other than tack wall for displaying posters, announcements, etc.
- D. I understand that the custodian or other designated staff member is the representative of the Alisal Union School District and is in charge of the facilities.
- E. I understand that the building will not be opened unless an adult official representative of the organization is present.
- F. I agree that should activities go beyond stated time and result in overtime pay for Alisal Union School District representatives the organization will pay the overtime cost.
- G. I understand that this application will be cancelled if publicity is given to the event being sponsored prior to obtaining an approval permit for use of the facility.
- H. I understand that groups are expected to place debris and litter in containers and generally clean-up the facility used.
- I. I understand that nothing shall be sold or distributed on the premises without prior approval.
- J. I understand that no alcoholic liquors or beverages shall be brought to or consumed on the premises.
- K. I understand that the sale or furnishing of food or soft drinks shall be limited to such section or sections of the buildings as designated by the authorities.
- L. I understand and agree that the Alisal Union School District incurs no liability for loss or theft of property of the applicant.