

# St .Henry Community Center

## FOB Access Form

The undersigned hereby request the use of and agrees to pay the charges as marked on this form for the use of the St. Henry Community Center. The undersigned agrees to be personally responsible for his/her proper conduct while using this facility, and to reimburse the Board of Education for any damage. The undersigned further agrees that the St. Henry Board of Education and its employees' shall be held harmless from any action or liability that may occur from any accident or injury resulting from the use of school facilities.

The undersigned is also responsible for any action or liability that may or could result from any accident or injury during the use of the facility by any unauthorized person the undersigned allows into the facility.

The undersigned must be

1. A High School Graduate
2. A resident of the St. Henry School District St. Henry Consolidated School employee, or St. Henry Alumni.
3. Pay an initial \$200 fee. (This is waived if you contributed \$200 or more during community center fundraising)
4. Pay an annual fee of \$20 on or before August 1<sup>st</sup> of each year.

Students are prohibited from using the facility unless they are under the direct supervision of their coach or a responsible adult.

There will be a \$10 fee to replace lost FOB's

\*\*I have read the above policy concerning the use of the St. Henry Community Center. I agree to abide by the above policy and accept all responsibility as outlined above.

Name \_\_\_\_\_ Signature\_\_\_\_\_

Address\_\_\_\_\_

Phone Number\_\_\_\_\_

### Office Use Only:

\$200 initial fee \_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_ Exempt

Date issued\_\_\_\_\_ FOB Number\_\_\_\_\_