



**CAPTAIN JOSEPH HOUSE  
FOUNDATION**

www.CaptainJosephHouseFoundation.org  
1108 South Oak Street \* Port Angeles, WA 98362 \* 360.460.7848 \* CPTJosephHouse@CJFH.org

June 22, 2018

Dwayne Johnson  
Port Angeles School District  
FAX: 360-457-4649

Re: Application of Use of School Facilities  
PAHS Auditorium

Date: Saturday, October 27, 2018

Dear Mr. Johnson:

Thank you for your time by telephone last week! This "Dance with the Stars" event, a fundraiser for Captain Joseph House Foundation is going to be a great event. In addition to the local adult 'dancers' who will be invited to participate; we have the opportunity to have up to 40 Port Angeles School District students to be part of this event as well.

In December, 2011, I worked with Franklin Elementary School teacher, Clair Rausch, and created the Honor, Respect, Remember MAC program. We have been working with children and their parents, December and May every year since then, in this multi-age community project. Several of the students, now in high school, volunteer in Captain Joseph House office. For the last six years, students have created the design, made the ornaments and decorated a tree for the Festival of Trees in November. Proceeds from this tree have then been donated to the Foundation from Olympic Medical Center Foundation. Many of these students will have the opportunity to participate in this "Dance with the Stars" evening!

The enclosed Facility Use Agreement includes the Insurance Coverage as required. Fryer Insurance Agency Inc. is the carrier for Captain Joseph House Foundation. Port Angeles School District #121 is listed as Additional Insured.

Thank you and let me know what steps are next!

Respectfully,

Betsy Reed Schultz, Gold Star Mother  
Executive Director

# FACILITY USE AGREEMENT

## Application to Use School Facilities

The School Board of Directors wishes to encourage use of school facilities by the community as long as use is for a lawful purpose and does not interfere with the conduct of the District's educational programs, the primary purpose of which the buildings and grounds are intended. Community use of facilities is subject to the terms of District Policy and Procedures 4260 and 4260P as well as the current schedule of user fees. **ALL** youth sports groups must provide a letter of compliance with mandated Youth Sports Concussion Management Protocols. Funds may be charged for use of school facilities to ensure that funds intended for education of children are not used for other purposes. Permission to use a particular facility may be denied based on a belief that the activity proposed may not be in the District's interests, or due to the level of previously scheduled use. No person shall be denied the full enjoyment of the facilities because of race, creed, color, sex, or origin.

NAME OF ORGANIZATION CAPTAIN JOSEPH HOUSE FOUNDATION  
 CONTACT NAME BETSY REED SCHULTZ NUMBER OF TEAMS/PARTICIPANTS non-sport event  
 BILLING ADDRESS 1108 SO OAK Port Angeles 98362 DAYTIME PHONE 360 460-7848  
 NATURE AND PURPOSE OF ACTIVITY DANCE WITH THE STARS - FUND RAISER  
 SPECIFIC FACILITY/SCHOOL REQUESTED Port Angeles High School

- |   |   |   |   |   |
|---|---|---|---|---|
| <input checked="" type="checkbox"/> Auditorium <u>PAC</u> | <input type="checkbox"/> Computer Lab                       | <input type="checkbox"/> Gym              | <input type="checkbox"/> Large Room     | <input type="checkbox"/> Library                |
| <input type="checkbox"/> NOPSC, Small Conf Room           | <input type="checkbox"/> NOPSC. Haller Room                 | <input type="checkbox"/> NOPSC. Cafeteria | <input type="checkbox"/> NOPSC. Foyer   | <input type="checkbox"/> NOPSC, Large Classroom |
| <input type="checkbox"/> Small Room                       | <input type="checkbox"/> Classroom                          | <input checked="" type="checkbox"/> Stage | <input type="checkbox"/> Athletic Field | <input type="checkbox"/> Conference Room        |
| <input type="checkbox"/> Podium                           | <input checked="" type="checkbox"/> Microphone <u>Sound</u> | <input type="checkbox"/> Other            |   |   |

DATES TO BE USED: OCTOBER 27, 2018 TO OCTOBER 27, 2018 DAY OF WEEK SATURDAY  
 TIMES OF DAY EVENING FROM 11:00 AM TO 11:00 PM

**FACILITY RENTAL FEES** will be determined by the latest established rental rates. Charges shown on the application form will be invoiced. Payments are to be made to the District within 30 days. Charges may be levied to cover the cost of additional services not covered in the original agreement or for damages or agreement violations. The District reserves the right to require and charge for custodial and/or other authorized District employees to be on the premises.

**AGREEMENT AND INSURANCE**

The person or organization entering into this agreement with School District for the use of facilities or equipment described above certifies that the information given in this application is current. The undersigned further states that he/she has the authority to make this application for the applicant and agrees that the applicant will observe all rules and regulations. The applicant further agrees to reimburse the School District for any damage arising from the applicant's use of said facilities. Any accident involving injury to participants or damages to facilities or equipment occurring during the use of facilities or equipment will be reported to District authorities immediately.

In accordance with Chapter 28A.335 RCW, private nonprofit groups serving youth are required to provide proof of bodily injury coverage of no less than \$50,000 per occurrence/\$100,000 aggregate. For-profit, business groups are required to provide proof of general liability coverage of no less than \$1 million dollars per occurrence. The School District must be named as additionally insured on said policy. Coverage cannot be cancelled or reduced without thirty-(30) day's written notice to the District. (Low-cost Special Events Liability Insurance is available through the school District's carrier.) Attached

N/A (initial) The applicant agrees to fully comply in accordance with the adoption of policies for the management of concussion and head injury in youth sports; as amended in RCW 4.24.660 and chapter 28A.600 RCW if applicable. Access to school facilities may not be granted until all requirements are complete and approved by the School District &/or designee.

The applicant agrees that the School District and its agents or employees will not be liable for any damage to person or property by reason of negligent acts of applicant, its agents, employees, invitees, or subcontractors. Applicant agrees to protect, indemnify for legal costs and other expenses, and hold harmless, the School District and its officers, employees, directors and agents from claims, liabilities, or suits, arising out of injury to person or property from negligent acts of applicant, directly or indirectly attributable to user's activities and/or use of premises except for sole negligence of the School District.

I have read the rules and regulations above and on the reverse side of this form and agree with the conditions and charges as established:

SIGNATURE OF APPLICANT Betsy Reed Schultz Date 10/22/2018  
 - SEE REVERSE SIDE

Other notes, comments, requirements:

**RULES AND REGULATIONS**

- Applicant/organization is responsible for the safety and conduct of its participants and spectators.
- **All non-profit youth sports group, verifies all coaches, athletes and their parent/guardian have complied with mandated policies for the management of concussions and head injuries as prescribed by HB 1824, section 2.**
- Satisfactory sponsorship and adequate adult supervision must be provided by the applicant. Security may be required for some activities.
- All events will be required to meet the occupancy load and fire and safety regulations of the City of Port Angeles and State of Washington.
- Use of alcohol, tobacco, and/or drugs is prohibited. Profane language and/or other objectionable conduct may result in barred use of facilities.
- Firearms or other dangerous weapons are prohibited on school grounds as defined by law.
- Games of chance, lotteries, and giving of door prizes are not allowed except where permitted by law and then only with proper clearances.
- Access to facilities and services, except as otherwise addressed in these rules, shall be limited to that specified on the application.
- Alterations to the field/facility are prohibited without prior approval. This may include such things as hanging signs, erecting backstops, placing goals, using masking tape on walls and floors, etc.
- District-owned equipment shall not be removed from the facility or loaned to any individual or organization unless prior approval by the District has been granted. Groups or individuals cannot use District-owned expendable supplies.
- Applicants are responsible for special set-up requirements and clean up unless specifically requested in the application. Users shall be responsible for returning the facility to its original condition immediately following the event.
- Appropriate gym shoes are required for all activities on the uncovered floor of gymnasiums.
- The applicant/organization shall not practice discrimination of any kind.
- Cancellations by applicants require at least a 24 hour notice. Otherwise, related actual costs shall be borne by the applicant.
- Facility use is cancelled when facility/building is closed due to an emergency.
- The District reserves the right to refuse or revoke any authorization issued for the use of a school building or grounds, and if rental has been paid, to refund such rental less expense incurred by the District in connection therewith.
- The Board and the District do not intend to create an open forum for public use of its facilities and grounds. The Superintendent and his/her designee shall take appropriate action to avoid such a forum being created. If at any time the Board wishes to change the nature of the forum it has previously allowed through community use of District facilities, the Board may do so to either expand or contract that forum and its attendant facilities usage.

**FOR DISTRICT USE ONLY**

Approved [  ] Disapproved [  ] Fee Group: [  ] A [  ] B [  ] C [  ] D [  ] E [  ] F

Certificate of Insurance [  ] Requested [  ] Received Letter Compliance w/HB1824 [  ] Requested [  ] Received

Facility/Building Rental Fee \$ \_\_\_\_\_ Per Hour = \$ \_\_\_\_\_ Other charges \$ \_\_\_\_\_

Total Billed \$ \_\_\_\_\_ Date Billed \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signature of Building Principal \_\_\_\_\_ Date \_\_\_\_\_

District Authorization By \_\_\_\_\_ Date \_\_\_\_\_

Copies to: Renter, Business Office, Principal, and Head Custodian



CAPTA-1 OP ID: 50

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/20/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Fryer Insurance Agency Inc PO Box 1347 Port Angeles, WA 98362		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:	
<b>INSURED</b> Captain Joseph House Foundation 1108 South Oak Street Port Angeles, WA 98362		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : Liberty Northwest Insurance Co INSURER B : Arch Insurance Comapny INSURER C : INSURER D : INSURER E : INSURER F :	

**COVERAGES**      **CERTIFICATE NUMBER:**      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL/SUBR INSR / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y	BKO 55520904	05/02/2018	05/02/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATUTORY LIMITS OTH LER E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Operations of the above insured. Port Angeles School District #121 is listed as Additional Insured.

<b>CERTIFICATE HOLDER</b>  Port Angeles School District #121 216 E 4th Street Port Angeles, WA 98362	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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## David Knechtel

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**From:** David Knechtel  
**Sent:** Monday, June 25, 2018 4:00 PM  
**To:** Dwayne Johnson  
**Subject:** PAC Usage?  
**Attachments:** 0489\_001.pdf

Dwayne, the attached document was faxed to us. I'm sending you the hard copy via courier. I presume they are trying to use the PAC at the high school. Would you review and consider whether this would work out okay? If you think it okay, then, please sign and return the forms to us.

--David

David Knechtel  
Port Angeles School District  
Director of Finance and Business Operations  
Email: [dknechtel@portangelesschools.org](mailto:dknechtel@portangelesschools.org)  
Phone: 360-565-3755