

St. Lucie Public Schools
Non-School Teams Usage Agreement

This usage agreement should be used when non-school teams promoting student athletic participation are requesting to use school district facilities.

The request must be approved two weeks in advance of the requested date and the requesting group must comply with the following:

- All requests must be submitted to the school's athletic department and be approved by the school's Athletic Director and administration prior to being sent to the County Athletics' Office (fax to 468-5177 once completed).
- Requesting groups must follow all rules associated with Policy 22 in the FHSAA Handbook regarding Non-School Teams.
- All requested activities must be directly supervised during the use by the School District employee that is listed below and approved by the school's Athletic Director.
- All athletic participants, must be student-athletes, at school site requested, and must have all paperwork on file and cleared by the school's Athletic Office (current ID card).
- Requesting groups will provide their own equipment when needed. Any requests that incur costs will have to be inputted as a Facilities Request and groups will be charged accordingly by the School District.
- No spectators will be present or paid admission will occur.
- Use must occur on school days at times when air conditioning is already scheduled to run.
- Must provide certificate of insurance or have waiver by risk management.

Part 1: Completed by requesting agency

School: _____ Today's Date: _____
Requesting Agency/Group: _____
Supervising Employee (must be SB employee with coaching or teaching certificate): _____
Facility Requested: _____
Dates/Times of Request: _____

As an authorized representative of the above agency, I approve and agree to all the terms listed above and any conditions imposed by the school.

Requesting Agency/Group (legal name): _____
Representative's Signature: _____ Date: _____

Part 2: Completed by School's Administration

Athletic Director's Signature: _____ Date: _____
Athletic Director (Print): _____
Administrator's Signature: _____ Date: _____
Administrator (Print): _____

Additional Conditions (if any):

Attachment required: Certificate of insurance or approved waiver
Coaching Certificate, unless a certificated teacher