Frankfort Square Park District Building Usage Request Form

Please fill out the building usage request form completely, and return it to:

Frankfort Square Park District 7540 W. Braemar Lane Frankfort, IL 60423

Phone (815) 469-3524 Fax (815) 469-8657 Email cstandish@fspd.org

Date of Submission:			
Organization:			
Type of Activity:			
	me:		
# of Participants:		% of Residents:	
	Requested Facility (I	Please circle one)	
	ing Community Room		
Nature Center	Champions Concession Star	nd Union Creek I	Hockey Shelter
First Contact Person:			
Address:	City:	St:	Zip:
Daytime Phone:	Home	2:	Cell:
Email (Required):			
C1C / / P			
Second Contact Perso	on:		
Address:	City:	St:	Zip:
Daytime Phone:	Home	2:	Cell:
Email (Required):			

Frankfort Square Park District Building Usage Procedures

The following facilities are available for use:

Meeting Room	Address	Capacity	Users
Administration Building	7540 W. Braemar Lane	100	Adult/Children
Community Room			
Administration Building	7540 W. Braemar Lane	40	Adult Only
Board Room #2			-
Nature Center	7540 W. Braemar Lane	20	Adults Only
Champions Concession Stand	20130 Rosewood Drive	30	Adult/Children
Union Creek Hockey Shelter	19900 S. 80 th Avenue	20	Adult/Children

Tours of all facilities are available upon request prior to your event.

Submission dates for meetings are as follows:

Deadline	Meeting Dates
May 1	June through August
August 1	September through December
December 1	January through May

CATEGORIES FOR ASSIGNING USAGE

Any group or organization requesting usage will be required to complete the Building Usage Request Form, available at the Park District's Administration Building, located at 7540 W. Braemar Lane, Frankfort, and online at www.fspd.org.

Request forms are considered on a first-come, first-served basis, and usage is scheduled on a quarterly basis, January – May, June – August, and September – December, and deadlines for submission are listed above.

Requests for usage will be determined based on the following categorized criteria:

Category 1 Requests

Frankfort Square Park District sponsored programs, based in and serving FSPD residents, i.e. Scout Groups, FSBL, and Wildcats Football.

Category 2 Requests

Non-profit groups/organizations with 100% group residency, i.e. Homeowner's Associations for subdivisions located within the FSPD borders.

Category 3 Requests

Non-profit groups/organizations with more than 50% residency. Completion of Residency Form, Attachment A, providing home addresses/subdivisions of participants is required.

Category 4 Requests

Non-profit/Non-resident groups/organizations with less than 50% residency may be provided space at cost, based on Attachment B facility rental agreement.

Priority will be given to any requests that have the largest percentage of residents.

FOB/KEY

The majority of park district facilities available for group usage are accessed with fobs, with the exception of the Nature Center which requires key access.

Groups are responsible for picking up the fob or key to the building during normal office hours on the day of their scheduled event. If the event takes place on a day that the office is closed, the fob or key should be picked up one day prior.

- The fob or key must be picked up by one of the designated contacts. However, if neither person is available, the name of an alternate person must be provided to the park district office, and a photo ID will be required. Under no circumstances will the fob or key be given to a minor.
- As a courtesy, the park district will call a contact person the day before the event to confirm the date, the time, and the facility requested.

Groups must return the facility to the same condition it was found prior to their use. It is the responsibility of the group leader to sweep floors, empty garbage, clean-up spills, and put all tables and chairs away before leaving.

The park district reserves the right deny building usage to groups that do not meet the required categorized criteria and/or to relocate groups in case of a problem with scheduling.

Reminder

Children are not allowed to be left unsupervised at any time during your event and must remain in the room under adult supervision at all times.

I have thoroughly read the above procedures and agree to follow all such rules and regulations of the Frankfort Square Park District. I also agree that I am fully responsible for the actions of anyone attending my scheduled event.

Contact Signature	Printed Contact Name
Contact Signature	Printed Contact Name

2017 Facility Requests

January

oundar y								
Sun	Mon	Tues	Wed	Thu	Fri	Sat		
1	2	3	4	5	6	7		
8	9	10	11	12	13	14		
15	16	17	18	19	20	21		
22	23	24	25	26	27	28		
29	30	31						

February

Sun	Mon	Tues	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

March

Sun	Mon	Tues	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

April

Sun	Mon	Tues	Wed	Thu	Fri	Sat
						1
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16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

May

			way			
Sun	Mon	Tues	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
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14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

June

Sun	Mon	Tues	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

July

			July			
Sun	Mon	Tues	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

August

Sun	Mon	Tues	Wed	Thu	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

September

Sun	Mon	Tues	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

October

Sun	Mon	Tues	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

November

November							
Sun	Mon	Tues	Wed	Thu	Fri	Sat	
			1	2	3	4	
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12	13	14	15	16	17	18	
19	20	21	22	23	24	25	
26	27	28	29	30			

December	
December	

	December							
	Sun	Mon	Tues	Wed	Thu	Fri	Sat	
						1	2	
	3	4	5	6	7	8	9	
	10	11	12	13	14	15	16	
	17	18	19	20	21	22	23	
I	24	25	26	27	28	29	30	
I	31							

Building Usage - Community Groups/Organizations - Attachment A Proof of Residency Information Form Category 3 Requests

Signature of Contact Person/Re	esponsible Party:						
As contact person/responsible party, I hereby confirm the accuracy of the information provided below.							
f of Participants: % of Residents:							
Participant's Name	Participant's Address	Participant's Subdivision					
1		<u> </u>					



Facility Rental Application – Attachment B Category 4 Requests

Even	t Date: F	iri S	Sat Sun	(circle da	y)		
Rent	al Start Time (includes set up)	a	ım / pm				
Rent	al End Time (includes take down)		am/pm				
Time	Revisions must be made by/before final pe	aymei	nt				
Facil	ity Requested (please check one)			*Nun	nber of	guests	
	Community Room (100 guest capacit	ty)					
	Board Room (45 guest capacity)						
	Champions Park Facility (30 guest ca	ıpacity	y)				
	Nature Center (20 guest capacity)						
Fees	(please check all that apply)						
	Security Deposit: \$100 (refundable le						
	Non-Resident Group Rental Rate ~ \$	125 (t	two hour	meeting)		Supervisor:	
	Non-Resident Group Rental Rate ~ \$			r meeting)		Confirmed:	
	Additional Hour Rate ~ \$50/each add	litiona	al hour				
Table	e Preference						
	Round ~ Ten 5½ foot tables and four	8 foo	t rectang	ular tables			
	Rectangular Tables ~ fourteen 8 foot		_				
	Champions Park ~ Three Round 5 ½:	foot t	ables				
Type	of activity:						
Rent	er Information						
Name	e of Renter						
	ess						
City _			Sta	te		Zip	
Home	Home Phone		Cel	l Phone			
E-Ma	il Address						
Rente	er's Signature				Date		
	Reservation No:		Ren	tal Amoun	t Due: S		
	Security Deposit Due: \$100					:	
	Security Deposit Paid On:				•	1:	
	Security Deposit Receipt No:			tal Amoun			

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