

KELLEYS ISLAND GYMNASIUM & EXERCISE EQUIPMENT USE FORM

ACCESS HOURS: NON-SCHOOL HOURS/DAYS

Requirements for holding a valid mobile app:

*You must be 18 years of age

And

*You or your immediate family must presently OWN property on Kelleys Island

or

*You must be a registered Kelleys Island voter.

**Applicants who do not meet any of the requirements above may petition the KILSD BOE using the reverse side of this application to do so.

**FAILURE TO FOLLOW THESE RULES MAY RESULT IN
YOUR CARD BEING REVOKED AND ACCESS DENIED**

GYMNASIUM & EXERCISE RULES

1. The person to whom the card was issued can only use this mobile app. You are responsible for everyone who enters the school with you and your mobile app. When you leave, all those who entered with you must also leave at this time. At no time should the facility be occupied without a certified mobile app owner present.
2. Kelleys Island School reserves the right to restrict hours that entry is available for public use.
3. All equipment must be picked up after use.
4. Restrooms in the hallway are to be kept clean and orderly.
5. No equipment shall leave the school. Equipment may not be borrowed.
6. No food, drinks(excluding bottled water), or animals are allowed into the school
7. Smoking, alcohol, and swearing are not permitted on school grounds.
8. No doors shall be propped open.
9. Only CLEAN tennis shoes are allowed on the gym floor and exercise area. No flip-flops, sandals, or street shoes are permissible. Shirts must be worn at all times.
10. By signing below you take full responsibility for yourself and guests for the use of the school and its equipment. Kelleys Island School will not be held liable for any injuries or death that may occur during this gymnasium/exercise availability time.

BY SIGNING BELOW, I AGREE TO ALL OF THE ABOVE RULES AND REGULATIONS OF THE KELLEYS ISLAND GYMNASIUM AND EXERCISE EQUIPMENT. I UNDERSTAND THAT IF I FAIL TO FOLLOW ANY OF THESE RULES, I MAY BE DENIED ACCESS TO THESE FACILITIES.

NAME (PRINT) _____ D.O.B. _____

NAME (SIGNATURE) _____ Date _____

KELLEYS ISLAND ADDRESS _____

PERMANENT MAILING ADDRESS _____

1st CONTACT PHONE #: _____ 2nd CONTACT PHONE #: _____

Email Address: _____



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