

NEW HAVEN UNIFIED SCHOOL DISTRICT  
District Office  
34200 Alvarado-Niles Road  
Union City, CA 94587  
(510) 471-1100

Before completing this form, please review the  
"Instructions for Filing" package

NEW HAVEN UNIFIED SCHOOL DISTRICT  
Corporation Yard  
3636 Smith Street  
Union City, CA 94587  
(510) 471-5555

### APPLICATION FOR USE OF SCHOOL FACILITIES

SUBMIT ALL COPIES OF APPLICATION TWENTY-ONE (21) WORKING DAYS IN ADVANCE

Please print or type clearly

Date Received 7/24/19

NAME OF ORGANIZATION Union City Football - Cheer League (UCFL) PERMIT # LOG 693

NAME OF APPLICANT Keala Keanadina WORK PHONE: 510-962-2844 HOME PHONE:

ADDRESS 32481 Elizabeth Way CITY Union City ZIP 94587

PERMISSION IS HEREBY REQUESTED TO USE THE FOLLOWING FACILITY(IES): SCHOOL Jame Logan High School

(Check Facility(ies) Needed):

- ☐ Pavilion  
☐ Gymnasium  
☐ Theater  
☐ Student Union/Diner  
☐ Faculty lounge  
☐ Kitchen - for use of facilities or equipment, arrangements must be made with the office of Food & Nutrition Services  
☐ Multipurpose room (meeting only)  
☐ Other (pls specify)

(Check Equipment Needed - may require additional fees)

- ☐ P.A. System w/operator  
☐ Speaker stands  
☐ Special effects stage lighting w/operator (including spot lights)  
☐ Scoreboard  
☐ Field lights  
☐ Snack Bar - for use of facilities or equipment, arrangements must be made with the office of Food & Nutrition Services  
☐ Restrooms  
☐ Other (pls specify)

For NHUSD  
Groups Only

- ☐ Chairs  
☐ Tables  
☐ Projector  
☐ Choral Risers

User group is responsible to obtain liability insurance as part of this agreement.

There is absolutely **NO SMOKING OR ALCOHOLIC BEVERAGES ALLOWED** on any New Haven Unified School District Premise

List All Date(s) Needed		***** Please attach a separate sheet if necessary *****	Time Needed (am or pm)	
From	To	Day(s) of the week	From	To
#1 <u>7/24/19</u>	<u>8/23/19</u>	<u>Monday through Friday</u>	<u>5:30 pm</u>	<u>7:30 pm</u>
#2 <u>8/27/19</u>	<u>10/31/19</u>	<u>Tuesday, Wednesday, Thursday</u>	<u>5:30 pm</u>	<u>7:30 pm</u>

☐ School Group ☒ Community Group ☐ Commercial User ☐ Other  
The nature and purpose of this activity(ies) or use is: Youth Football Practice Expected Attendance: 120

Open to public ☒ Yes ☐ No Percentage of membership who are residents of NHUSD 90%  
Donation/Admission Charge ☐ Yes \$ ☒ No Proceeds will be used for

PLEASE NOTE THAT ANY ACTIVITY CAN BE PREEMPTED BY A SCHOOL ACTIVITY

I hereby certify that I shall be personally responsible on behalf of our organization for any damage sustained to the school premises because of the occupancy of said premises by our organization. I understand that it is my responsibility to obtain, read, and understand the complete set of rules and regulations relative to use of these facilities and that I agree to abide by such rules and regulations.

I also agree to hold the New Haven Unified School District, its Board of Education, the individual members thereof, and all District officers, agents and employees free and harmless from any loss, damage, liability, cost or expense that may arise during or be caused in any way by such use or occupancy of school facility.

I, the undersigned, state that, to the best of my knowledge, the school property for the use of which this application is hereby made will not be used for the commission of any act intended to further any program or movement the purpose of which is to accomplish the overthrow of the government of the United States by force, violence, or other unlawful measure.

Furthermore, that UCFL, the organization on whose behalf I am making application for use of school property, does not, to the best of my knowledge, advocate the overthrow of the government of the United States or of the State of California by force, violence, or other unlawful measures, and that, to the best of my knowledge, it is not a communist action organization or communist front organization required by law to be registered with the Attorney General of the United States. This statement is made under the penalties of perjury.

Signature [Signature] Title Vice President Date 7/24/19  
Organization's Authorized Representative

FOR SCHOOL USE ONLY: Facilities Available Date \_\_\_\_\_  
Yes ☐ No ☐ Initial \_\_\_\_\_

COMMENTS: 7/24/19 Entered Tandem

FOR OPERATIONS USE ONLY: Date \_\_\_\_\_  
Initial \_\_\_\_\_

COMMENTS: need insurance certificate 7.30.19 recd insurance cert. Expires 7/22/20

FOR FOOD & NUTRITION SERVICES ONLY: Date \_\_\_\_\_  
Caf. Worker Fee \_\_\_\_\_ Other \_\_\_\_\_ Initial \_\_\_\_\_

COMMENTS: APPROVED: R.P. 8.1.19 #1 & #2

FOR CORPORATION YARD USE ONLY: Date 8-5-19

COMMENTS:

This Application ☒ Approved ☐ Disapproved

Fees: Custodial (actual) Use \_\_\_\_\_ Utilities \_\_\_\_\_ Other \_\_\_\_\_

Signature: [Signature]  
Authorized Representative of Board of Education



# Recurrence List

Date Start	Name	Time Start	Time End	Status
07/24/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
07/25/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
07/26/2019 (Fri)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
07/29/2019 (Mon)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
07/30/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
07/31/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/01/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/02/2019 (Fri)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/05/2019 (Mon)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/06/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/07/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/08/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/09/2019 (Fri)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/12/2019 (Mon)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/13/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/14/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/15/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/16/2019 (Fri)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/19/2019 (Mon)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/20/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/21/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/22/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
08/23/2019 (Fri)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active

# Recurrence List

Choose the events you want to take action on

<input type="checkbox"/> Date Start	Name	Time Start	Time End	Status
<input type="checkbox"/> 08/27/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 08/28/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 08/29/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/03/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/04/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/05/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/10/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/11/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/12/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/17/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/18/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/19/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/24/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/25/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 09/26/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/01/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/02/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/03/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/08/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/09/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/10/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/15/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/16/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/17/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/22/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/23/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/24/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/29/2019 (Tue)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/30/2019 (Wed)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active
<input type="checkbox"/> 10/31/2019 (Thu)	Union City Youth Football & Cheer (UCFL)	5:30 pm	7:30 pm	Active

Edit

Cancel

Delete

Back



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/29/2019

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> <b>ESP INSURANCE BROKERAGE LLC</b> 306 Main Street Worcester, MA 01608	<b>CONTACT NAME:</b> <table style="width: 100%;"> <tr> <td style="width: 50%;">PHONE (A/C, No, Ext): -</td> <td style="width: 50%;">FAX (A/C, No):</td> </tr> <tr> <td colspan="2">E-MAIL ADDRESS:</td> </tr> </table>	PHONE (A/C, No, Ext): -	FAX (A/C, No):	E-MAIL ADDRESS:											
PHONE (A/C, No, Ext): -	FAX (A/C, No):														
E-MAIL ADDRESS:															
<b>INSURED</b> <b>UNION CITY FOOTBALL &amp; CHEER LEAGUE</b> 32481 ELIZABETH WAY Union City, CA 94587	<table style="width: 100%;"> <tr> <td style="text-align: center;">INSURER(S) AFFORDING COVERAGE</td> <td style="text-align: center;">NAIC #</td> </tr> <tr> <td>INSURER A : Houston Casualty Company</td> <td style="text-align: center;">42374</td> </tr> <tr> <td>INSURER B : AIG Insurance</td> <td style="text-align: center;">19402</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Houston Casualty Company	42374	INSURER B : AIG Insurance	19402	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <table style="width: 100%;"> <tr> <td><input type="checkbox"/> CLAIMS-MADE</td> <td><input checked="" type="checkbox"/> OCCUR</td> </tr> </table> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	<input type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR	X		197008660	07/22/2019	07/22/2020	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$1,000,000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
<input type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR								
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						\$ \$ \$ \$ \$		
	<b>UMBRELLA LIAB</b> <b>EXCESS LIAB</b> DED RETENTION \$						OCCUR CLAIMS-MADE \$ \$		
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N	N / A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$		
B	A&H			SRG0009133720	07/22/2019	07/22/2020	SEE REMARKS		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

THE CERTIFICATE HOLDER is added as an additional insured with respects to general liability coverage but only with respect to liability arising out of the operations of the named insureds league.

Sexual Abuse / Molestation limits are as follows: \$1,000,000 EACH OCCURRENCE / \$1,000,000 AGGREGATE

THIS POLICY DOES NOT EXCLUDE CONCUSSIONS

(See Attached Descriptions)

**CERTIFICATE HOLDER****CANCELLATION**

New Haven Unified School  
 District  
 34200 Alvarado-Niles Rd.  
 Union City, CA 94587

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

*Peter H. Henson*

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## DESCRIPTIONS (Continued from Page 1)

### YOUTH PARTICIPANTS ACCIDENT & HEALTH COVERAGE

Accidental Death, Accidental Dismemberment (AD&D) Benefit: \$10,000 Maximum amount

Accident Medical Expense Benefit: \$250,000

Deductible: \$250  
per accident

Dental Maximum: \$250 per  
tooth/per accident

Incurral Period: within 90 days of the date of the accident causing the Injury

Benefit Payout Period: payable only for such charges incurred within 52 weeks after the date of the  
accident causing the Injury