

Use of Facility Guidelines for Parent Volunteer Organizations

Every year, Parent Volunteer Organizations, such as PTA/PTSA, Booster Club(s), Alumni and/or Foundations are required to enter a Blanket Use of Facility agreement.

Your school is required to produce this for your principal's annual audit.

Blanket UoF agreements will be in effect for the duration of your COI *(Certificate of Insurance).* There is no charge for these agreements, once it has been approved by the district and will cover the following:

- ✓ Permission to use the school's name
- ✓ Fundraising efforts on behalf of the school

Per annual agreement, Parent Volunteer Organizations will be required to enter a separate use of facility (UoF) agreement for:

- ANY/ALL carnivals, fairs, and/or festivals no matter when they take place
 Any after-school programs sponsored by PTA/PTSA
 All weekend, evening or events scheduled on nonstudent days
- Each reservation will serve as a separate UoF agreement for these events. Events must be submitted 30 days prior to planned event to provide time for verification of documents/information and approval process.

Note: PTA & Booster Clubs are waived of paying rental fees. However, these organizations are still required to cover the indirect costs that our district incurs associated with reservations, so the school/district does not incur these fees itself. These costs can include personnel OT, utilities when not in normal use and custodial supplies such as hand soap, toilet paper, paper towels, and other cleaning supplies used during their events, if applicable. Organizations cannot provide outside custodial supplies. Every reservation is evaluated on a case-by-case basis.

What your organization is responsible for:

- You will need to create an account in your organization's name if you have not already done so
 - Note: PTA/PTSA name should match what they have <u>registered with the FL PTA</u> (example: B C Graham Elementary PTA)
- □ Parent Volunteer Organizations are required to enter their request a minimum of 30 days prior to first date of use
- □ Organizations must be in compliance with parent organization and/or the IRS

You will need to upload the following documents:

- Current/Valid Certificate of Insurance (COI)
- EIN and/or Tax exempt Certificate

This document will be uploaded to the insurance section of the organizations account and must be in compliance with HCPS policies:

- The PTA/PTSA/Booster Club shall provide the school with proof of general liability insurance to cover all its activities at the Property with an amount of \$50,000 per accident and \$300,000 per occurrence
- > Name on COI must match account name in Facilitron (example: B C Graham Elementary PTA)
- Must have HCPS listed as "Additionally Insured" and should read exactly as follows:
 - Hillsborough County Public Schools 901 E. Kennedy Blvd. Tampa, FL. 33602

□ Valid Tax exempt certificate or EIN # associated your organization's name

This document will be uploaded to the "document" section and should be applied to "ALL" reservations. This document tells us that you are an active non-profit organization that is allowed to use the name of your parent organization PTA or School Booster Club.

Facilitron 24/7 helpline: 1-800-272-2962, <u>Facilitron Webinar Registration - offered bi-weekly</u> Online tutorials and helpful FAQ visit: <u>Facility Owner/Administrator Solutions : Facilitron Helpdesk</u>



- 1. You will need a digital copy of your certificate of insurance (COI) and ending date of the policy.
- 2. Log into your parent volunteer organization account.
- 3. From your dashboard (a) or welcome screen (b) type your school's name in the enter facility box and select your school from the listings in your city.

| Payments | Upcoming Events No events found. | Pending Requests No Pending Requests |
|--|--|---|
| No Payment Require | :d | |
| | Details | |
| New Request | | |
| Freedom High | | |
| Freedom High School, Oakle Freedom High School, Tamp Freedom High School, Orlar Freedom Middle School, Orl Freedom Middle School, Orl Freedom Elementary School | y, CA a, FL do, FL , Fort Wor | |
| Freedom Elementary School | Bradentc | |
| Freedom Elementary School | Del and | |

Welcome screen



Find it on Facilitron.

Connect with the ideal venue for your next event effortlessly on Facilitron – the world's largest public spaces rental marketplace.

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4. Once on your school's landing page, in the "search facility" box, type classroom and select Standard Classroom, then click Search.



5. Select the standard classroom at your school. This should be the very 1st option listed.



a.



6. **Increase quantity of classrooms to 1**, this will then allow you to choose the COI ending date on the calendar.



7. Click on the month/year to scroll change the year and/or month, <u>select the date your COI expires</u> then **select any 30 min window of time** available. Then **click continue**.

| | Select your date & quantity (qty) | | | | Select your date & quantity (qty) | | | | Select start & end time | | | × | | | | | |
|----|-----------------------------------|-----------------------|-------------|--|-----------------------------------|----------|-----------|-----------|-------------------------|---------|---------|---|-----------------------|--------------------|-------------------------------------|------------|--|
| | Qty of classroom | ns? (up to 75) | - 1 + | | Qty of c | lassroor | ns? (up | to 75) | | Ξ | 1 🕂 | | < | Saturday, Apr | 04.2026 🖀 | > | |
| | < | 2025 | > | | | | | | | | | | 9:00 AM | • | 9:30 AM | • | |
| | Jan | Feb | Mar | | < | | <u> </u> | pril 202 | <u>6</u> | | > | | 6:00 AM 6 | :30 AM 7:00 AM | 7:30 AM 8:00 A | M 8:30 AM | |
| | Apr | May | Jun | | Su | Мо | Tu | We 1 | Th 2 | Fr 3 | Sa 4 | | 9:00 AM 8 | 30 AM 10:00 AM | 10:30 AM 11:00 A 1:30 PM 2:00 Pl | M 11:30 AM | |
| | Jul | Aug | Sep | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | | 3:00 PM 3 | :30 PM 4:00 PM | 4:30 PM 5:00 PI | M 5:30 PM | |
| | Oct | Nov | Dec | | 12 | 13 | 14 | 15 | 16 | 17 | 18 | | 6:00 PM 6 | 30 PM 7:00 PM | 7:30 PM 8:00 PI | M 8:30 PM | |
| | Mo | re items in your o | art | | 19 | 20 | 21 | 22 | 23 | 24 | 25 | | 9:00 PM S Adjust n | :30 PM 10:00 PM | 10:30 PM 11:00 P Continue (30 r | min) | |
| | | facilities at Freedon | High School | | 26 | 27 | 28 | 29 | 30 | 10000 | | | Remem | per to include set | up and break do | own time | |
| a. | | identice of Freedom | <u></u> | | | open av | anability | / through | n u6/30 | 12026 | | | | More items in | n your cart | ~ | |

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Facilitron 24/7 helpline: 1-800-272-2962, <u>Facilitron Webinar Registration - offered bi-weekly</u> Online tutorials and helpful FAQ visit: <u>Facility Owner/Administrator Solutions : Facilitron Helpdesk</u>



8. Add 1 day to cart.



- a. General
- 9. Click "No Thanks" to additional facilities.

Other (meeting, class, etc.)



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10. Click Check Out.

a.



11. Name event <u>Blanket Use of Facility</u> and complete facility use questionnaire as it is below, then click Continue.

| ent Information | |
|---|-----------|
| unt at Franklan High Cabaci | |
| Vent at Freedom High School | |
| tail of Person of Organization Booking Event: | |
| :queline.thoms@hcps.net | |
| 'arent Volunteer Organization | • |
| Blanket Use of Facility | \supset |
| Dther (meeting, class, etc.) v 25 | |
| hat are the hours of your event/rehearsal (excluding any setup time)? | |
| N/A | 1 |
| | |
| this a school-oriented (PTA/PTSA/Booster Club) Activity? If yes, please describe which | h |
| janization. Otherwise, please enter N/A, inter Your Answer | |
| Yes PTA | 1 |
| | |
| this a government-sponsored activity? | |
| | |
| ective June 15, 2016 to June 14, 2022, the following local governments are participant | s in |
| Joint use of recreational facilities. The following organizations qualify for use: Hillsbor winty. City of Plant City. City of Tampa. City of Temple Terrace. | /ougn |
| anty, only of Plant only, only of rampa, only of remple remade. | |
| CPS will make available property, specifying the location, and scheduled times for use | of the |
| operty. No rental fee will be charged by HCPS. However, HCPS will charge for all direct | t costs |
| sociated with the use of the Property including but not limited to, staffing (including ov | /ertime |
| current established rates), and materials and/or supplies associated with use. | |
| plicable fees: a) Restroom fees: User will pay HCPS for restroom supplies at game fac | ilities. |
| CPS will keep their restroom facilities open for games throughout the season. There will | ll be |
| restroom fee at practice facilities and b) Facility: User will pay HCPS to have a staff m | ember |
| en and close facility for approved events. | |
| thing berein is intended to serve as a waiver of sovereign immunity as provided by s | |
| 8.28. Florida Statutes, by any agency or political subdivision to which sovereign immu- multiplication in the sovereign immu- sion of the sovereign immu- immu and the sovereign immu- immu and the sovereign immu and the sovereign immunity as provided by s. | nity |
| ay be applicable. | |
| the event of any conflict between the Agreement for the Lice of Eacilities and the Con- | oral |
| operative Agreement, the General Cooperative Agreement will prevail. | erai |
| | |
| fes, please describe which local government that you are associated with (Hillsboroug | jh |
| unty, City of Plant City, City of Tampa, City of Temple Terrace). Otherwise, please entr | .er |
| A. Inter Your Answer | |
| No | |
| | |
| this a perconal/private business activity? | |
| | 0.00 |
| | |





12. Click continue (No need to add additional services).

| | let obe of Fuolity | |
|---------|---|--|
| loom | 107 - Classroom | Sat, Apr 04, 2026; 9:00 AM - 9:30 AM |
| Even | t Insurance | |
| This fa | cility requires event liability ir | Isurance. <u>View insurance requirements</u> - |
| | Event Insurance Protecti | on |
| | | |
| U | Please note that you will ne | ed to obtain and upload a Certificate of Insurance that |
| U | Please note that you will ne satisfies the requirements a | eed to obtain and upload a Certificate of Insurance that above prior to your first event date. You can purchase |

Options selected below apply to all days in the reservation. Prices shown are the totals (per unit) for all uses.

School Security

\$102.00

 Reservation details

 Image: Constraint of the servation of th

This is the best estimate based on the provided information. IMPORTANT: All requests must be approved by Hillsborough County Public Schools [Freedom High School and all payment and insurance requirements (if any) must be satisfied before the user is granted authorization to use facilities. It is recommended that users review the terms and conditions for facility use and be able to provide the use permit (available from your reservation) at the time of your event.

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13. Agree to Terms & Agreements, then Submit.





- 14. Choose "pay by mail" to temporarily bypass the payment process, then select Submit
 - **a.** Note: After the school accepts your request and your information is validated by Facilitron, fees will be removed when the permit is issued.

| Step 3 out of 3 Payment | | | Reservation details | |
|--|----------------------------------|--------------------------------|--------------------------------|----------|
| Payment Method | | | | |
| Card eCl | heck PayPal | By Mail | SAMPLE PHOTO | |
| To pay by check or money | order: | Classr | oom Utilities | \$28.00 |
| Please make your check or mone | y order payable to Facilitron | Custor | dial Staff | \$112.00 |
| Facilitron, Inc. is the authorized p | rocessor of all payments for thi | s transaction Custor | dial Supplies | \$53.27 |
| Include printout of the confirmation | on email or write the order num | ber from the confirmation Room | 107 - Classroom | \$74.77 |
| Mail to: Facilitron - Requests, PO | Box 1935. Los Gatos. CA 95031 | -1935. Sales | Tax 1/1/25 | \$30.42 |
| | ,,,,,, | Site Su | upervisor | \$200.00 |
| | | Subtot | al | \$498.46 |
| Blanket Use of Facility | | Pay No. | w | \$498.46 |
| Attendance: 25 | | My | dates and times are flexible 📀 | |
| Freedom High School Pequested By: Jackie's Test Extern | al Poptor Quotos Account (Jaci | ria Thoms) | Submit | |
| Requested by, Jackie's Test Extern | lai Kenter Quotes Account (Jaci | | Submit | |
| Classroom Standard | Sat, Apr 04, 2026 | 9:00 AM - 9:30 AM | | |

Why am I being charged these rates/fees?

\$53.27 \$200.00 \$112.00 \$28.00 \$74.77 \$30.42 \$498.46

Ilsborough County ent and insurance rized to use the

15. Confirmation page ~ Almost Done!

Take note of the "Request No." If you have questions that will be needed to find your specific request.

| You will receive a confirmation email. Berint this page for your records | |
|--|--|
| | |
| Request No. JXKD3W9NG9H4 | |
| Blanket Use of Facility | THE AL |
| Attengance: 25 Hillsborough County Public Schools Freedom High School Requested By: Parent Volunteer Organization (Jackie Thoms) | SAMP |
| Classroom Standard Sat, Apr 4, 2026; 9:00 AM - 9:30 AM | Reservation Details |
| Enter instruction and comments here | Custodial Supplies Site Supervisor Custodial Staff Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 |
| Submit You can also submit additional instructions later. | Total |
| | Continue |
| You may attach supporting documents | |
| You may attach supporting documents This reservation requires event liability insurance | This is the best estimate based on t |
| You may attach supporting documents This reservation requires event liability insurance Certificate of insurance | This is the best estimate based on the IMPORTANT: This request has to be Public Schools Freedom High Sch |
| You may attach supporting documents This reservation requires event liability insurance Certificate of Insurance Select a file to upload (PDF, PNG, JEPG, JPG, etc.) | This is the best estimate based on the IMPORTANT: This request has to be Public Schools [Freedom High Sch requirements must be satisfied befor facilities. |
| You may attach supporting documents This reservation requires event liability insurance Certificate of insurance Select a file to upload (PDF, PNG, JEPG, JPG, etc.) Choose file No file chosen | This is the best estimate based on the MPORTANT: This request has to be Public Schools [Freedom High Sch requirements must be satisfied befor facilities. Helpful Links |
| You may attach supporting documents This reservation requires event liability insurance Certificate of insurance Select a file to upload (PDF, PNG, JEPG, JPG, etc.) Choose file No file chosen Upload | This is the best estimate based on the MPORTANT: This request has to be Public Schools [Freedom High Sch requirements must be satisfied before facilities. Helpful Links When will my reservation be approve How doil my reservation be approve How doil say reservation be approve Helpful Links |
| You may attach supporting documents This reservation requires event liability insurance Certificate of insurance Select a file to upload (PDF, PNG, JEPG, JPG, etc.) Choose file No file chosen Upload | This is the best estimate based on U IMPORTANT: This request has to be Public Schools [Freedom High Sch requirements must be satisfied befo facilities. Helpful Links When vill my reservation be approv How do I send in my insurance cert How can I pay for my reservation? |
| You may attach supporting documents This reservation requires event liability insurance Certificate of insurance Select a file to upload (PDF, PNG, JEPG, JPG, etc.) Choose file No file chosen Upload Your request is now awaiting approval | This is the best estimate based on U IMPORTANT: This request has to be Public Schools [Freedom High Sch requirements must be satisfied befor facilities. Heipful Links When will my reservation be approv How do I send in my insurance cert How can I pay for my reservation? What if I need to make changes to r View more |

Next up – Insurance requirements



COI Sample: Parent Volunteer groups policy requirements: Liability coverage at the Property with a minimum amount of \$50,000 per accident and \$300,000 per occurrence.

| ACORD [®] CE | ERTIFICATE OF LIA | BILITY INSURAN | CE | DATE (MM/DD/YYYY) |
|--|--|---|---|-----------------------|
| THIS CERTIFICATE IS ISSUED AS A | MATTER OF INFORMATION ONLY | Y AND CONFERS NO RIGH | IS UPON THE CERTIFICAT | 06/05/2018 |
| CERTIFICATE DOES NOT AFFIRMAT | IVELY OR NEGATIVELY AMEND, | EXTEND OR ALTER THE | COVERAGE AFFORDED E | BY THE POLICIE |
| BELOW. THIS CERTIFICATE OF INS | SURANCE DOES NOT CONSTITU | TE A CONTRACT BETWEE | N THE ISSUING INSURER | (S), AUTHORIZEI |
| IMDORTANT: If the cortificate holder | ID THE CERTIFICATE HOLDER. | nolicy/ice) must have ADDI | | e or bo ondoreo |
| If SUBROGATION IS WAIVED, subject | to the terms and conditions of the | he policy, certain policies m | av require an endorsemen | t. A statement o |
| this certificate does not confer rights to | o the certificate holder in lieu of su | ch endorsement(s). | ·, ·, · | |
| RODUCER | | CONTACT NAME: Tony Cannizzaro | | |
| First Commercial Insurance Agency | | PHONE (A/C. No. Extl: (386) 775-1781 | (A/C, No): | (386) 775-3666 |
| P.O. Box 295 | ļ | ADDRESS: insuranceguy@cfl. | r.com | |
| | | INSURER(S) AFF | ORDING COVERAGE | NAIC # |
| Cassadaga | FL 32706 | INSURER A: ZODIAC INSURAL | NCE COMPANY | |
| A Party 2 Pomomber LLC | Must be completed a | nd . | | |
| 11102 Bridgecreek Drive | | C: | | |
| TTO2 Diagecreek Drive | include DBA if applic | able (D) | | |
| Riverview | FL 33569 | | | |
| COVERAGES CER | TIFICATE NUMBER: USP243794 | | REVISION NUMBER: | I |
| THIS IS TO CERTIFY THAT THE POLICIES | OF INSURANCE LISTED BELOW HA | VE BEEN ISSUED TO THE INS | URED NAMED ABOVE FOR T | HE POLICY PERIO |
| INDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY | EQUIREMENT, TERM OR CONDITION PERTAIN, THE INSURANCE AFFORD | OF ANY CONTRACT OR OTH | ER DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T | CT TO WHICH TH |
| EXCLUSIONS AND CONDITIONS OF SUCH I | POLICIES. LIMITS SHOWN MAY HAVE | BEEN REDUCED BY PAID CLAIN | S. | |
| TR TYPE OF INSURANCE | ADDL SUBR INSD WVD POLICY NUMBER | MM/DD/YYYY MM/DD/YYY | | 5 |
| COMMERCIAL GENERAL LIABILITY | X - Indicates additional | insured | EACH OCCURRENCE | \$ 1,000,000.00 |
| CLAIMS-MADE X OCCUR | | | PREMISES (Ea occurrence) | \$ 300,000.00 |
| . – – – – – – – – – – – – – – – – – – – | | | MED EXP (Any one person) | \$ 5,000.00 |
| A | X 218255897 | 06/10/2018 06/10/201 | 9 PERSONAL & ADV INJURY | \$ 1,000,000.00 |
| GENTLAGGREGATE LIMIT APPLIES PER: | **SAMPLE | ONLY** | GENERAL AGGREGATE | \$ 2,000,000.00 |
| POLICY JECT LOC | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000.00 \$ |
| AUTOMOBILE LIABILITY | Policy expir | ration date | COMBINED SINGLE LIMIT | \$ |
| ANY AUTO | must be a t | future date 🖉 🦯 | BODILY INJURY (Per person) | \$ |
| OWNED SCHEDULED | | | BODILY INJURY (Per accident) | \$ |
| HIRED NON-OWNED AUTOS ONLY | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | | ų er manerių | \$ |
| UMBRELLA LIAB OCCUR | | AMPLE ONLY | EACH OCCURRENCE | \$ |
| EXCESS LIAB CLAIMS-MADE | Insura | nce limits may vary | AGGREGATE | \$ |
| DED RETENTION \$ | | | | \$ |
| WORKERS COMPENSATION AND EMPLOYERS' LIABILITY V / N | | | STATUTE ER | |
| ANY PROPRIETOR/PARTNER/EXECUTIVE | N/A | | E.L. EACH ACCIDENT | \$ |
| (Mandatory in NH) If yes, describe under | | | E.L. DISEASE - EA EMPLOYEE | \$ |
| DÉSCRIPTION OF OPERATIONS below | | | E.L. DISEASE - POLICY LIMIT | \$ |
| | | | | |
| | | | | |
| ESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL | ES (ACORD101 Additional Remarks Schedul | le may be attached if more space is rea | wired) | |
| Hillsborough County Schools is an addition | al insured with respect to general liab | pility. | | |
| | | | | |
| | | Must contain this | statement and/or | |
| | | marked with an X i | n the box above | |
| | | | | |
| | | | | |
| CERTIFICATE HOLDER | including address | CANCELLATION | | |
| | | CHOLU D ANY OF THE ABOV | | ANCELLED REFOR |
| Imust | appear as certiticate | THE EXPIRATION DATE | THEREOF, NOTICE WILL I | BE DELIVERED I |
| Hillsborough County Public S | schools | ACCORDANCE WITH THE PO | LICY PROVISIONS. | |
| 901 East Kennedy Boulevard | 1 | | | |
| | | AUTIONIZED REPRESENTATIVE | | |
| | | | | |
| Tampa | FL 33602 | authory anizor | and the second se | |



16. **Upload your Insurance** - You can upload your COI from this confirmation page (**a**), the request management page (**b**) or from your dashboard (**c**).

| Certificate of I | nsurance v |) | | |
|---|--|--|--|---|
| elect a file to | upload (PDF, PNG, JEPG, JPG | , etc.) | | |
| Choose file | COI Sample AIM Certificate of I | nsurance.pdf | | |
| Upl | pad | | | |
| opi | odd | | | |
| | | | | |
| | | | | |
| | | | | |
| ick Go | to Request Man | agement Page | | |
| ick Go | to Request Man | agement Page | Classroom Utilities | \$28.0 |
| ick Go | to Request Man | agement Page | Classroom Utilities Room 107 - Classroom | \$28.0 \$74.7 |
| ick Go Your request Once your request Please note that i | to Request Man is now awaiting approval st is approved, you will receive an email n t may take several business days to revi | agement Page notification with finalized pricing. ew and respond to this request. | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 | \$28.0 \$74.7 \$30.4 |
| ick Go Your request Once your request Please note that i | to Request Man is now awaiting approval it is approved, you will receive an email n t may take several business days to revi | agement Page | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total | \$28.0 \$74.7 \$30.4 \$4 5 |
| Vour request Once your request Please note that i | to Request Man is now awaiting approval is is approved, you will receive an email n t may take several business days to revi request | agement Page | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total Continue Shop | \$28.0 \$74.7 \$30.4 \$49 \$ 49 |
| ick Go Your request Once your reque: Please note that i Manage your You can view and dashboard, when | to Request Man is now awaiting approval at is approved, you will receive an email in tray take several business days to revi request manage your request from the Request a you can also: | agement Page outfication with finalized pricing, ew and respond to this request. Management Page on your | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total Continue Sho | \$28.0 \$74.; \$30.4 \$49 \$49 \$49 \$49 \$49 \$49 \$40 \$40 \$40 \$40 \$40 \$40 \$40 \$40 \$40 \$40 |
| ick Go - Your request Please note that i Manage your You can view and dashboard, when • View request d | to Request Man is now awaiting approval is is approved, you will receive an email in t may take several business days to revi request manage your request from the Request a you can also: tails and pricing | Address of the second s | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total Continue Shop This is the best estimate based on the pro | \$28.(\$74. \$30 \$4 oping = vided information. |
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| ick Go - Your request Once your reque Please note that if Manage your You can view and dashboard, when • View request d • Share event cal • Share svent cal | to Request Man is now awaiting approval it is approved, you will receive an email m it may take several business days to revi request I manage your request from the Request by you can also: etails and pricing endars (after approval) a linstructions and requests | agement Page otification with finalized pricing. ew and respond to this request. Management Page on your | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total Continue Sho This is the best estimate based on the prr IMPORTANT: This request has to be appr Public Schools Freedom High School an requirements must be salified before you | \$28. \$74, \$30. \$40 wided information. oved by Hilbborough C wided information. are authorized to use |
| ick Go Your request Drace your reque Please note that in Manage your You can view and dashboard, when • View request d • Share event cal • Share event cal • Submit additior • Upload proof of | to Request Man is now awaiting approval at is approved, you will receive an email in the tray take several business days to revious request In manage your request from the Request ay ou can also: stails and pricing endars (after approval) al instructions and requests insurance and other documents | agement Page outfication with finalized pricing, ew and respond to this request. Management Page on your | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total Continue Sho This is the best estimate based on the pro IMPORTANT: This request has to be appr Public Schools Freedom High School an requirement must be satisfied before you facilities. | \$28.1 \$74, \$30. \$4 pping * wided information. voved by Hilbsbrough C or d all payment and insu a are authorized to use |
| ick GO - Your request Once your reque Please note that i Manage your You can view and dashboard, when 4 - Share event cal 5 Share event cal 5 Submit addition Upload proof o 5 Make payment | to Request Man is now awaiting approval at is approved, you will receive an email in tray take several business days to revi request manage your request from the Request a you can also: tatilis and pricing endars (after approval) al instructions and requests insurance and other documents (after approval) | Dagement Page | Classroom Utilities Room 107 - Classroom Sales Tax 1/1/25 Total This is the best estimate based on the pro IMPORTANT: This request has to be appr Public Schools Freedom High School an requirement must be satisfied before you facilities. Helpful Links When will my reservation be approved? | \$28. \$74. \$30. \$40 wided information. word by Hillsborough of all payment and insuf- d all payment and insuf- |

Navigate to insurance section (left column, 4th box down) click Upload... to choose file.

What if I need to make changes to my re

| - ✓ Insurance: | Renter-Provided 😧 Completed *Auto | |
|--------------------|-------------------------------------|--------------|
| Upload Certificate | | Newest First |

c. Dashboard - Select Insurance tab from left menu pane – then in upper right corner Insurance: select Upload.

Note: Terms lists policy requirements this will only appear if you have no policy uploaded, your policy was not able to be auto verified and needs to be viewed by a team member to manually verify or if it's invalid.

| facilitro | ron s&r | | | ent Volunteer Organi | 🌐 English 🝷 🂭 ⊘ 🚩 | | | |
|-----------------------------|--------------------|------------------------------------|-------------------------|----------------------|----------------------|-------------------------|------------|-----------------------------|
| jacqueline.thoms@hcps.net · | Insurance | | | | | | | |
| 1 Dashboard | Insurance Certific | ates | | | Pending Verification | | | |
| Calendar | 04/11/2025 | Hillsborough County Public Schools | A Pending Verification | View Certificate | Freedom High School | | | Insurance: @ Terms 🚺 Upload |
| Payments > | 04/11/2025 | Hillsborough County Public Schools | 10/22/2024 - 10/22/2025 | View Certificate | JXKD3W9NG9H4 | Blanket Use of Facility | 04/04/2026 | |
| Documents | | | | | | | | |
| • Insurance | | | | | | | | |
| 荘 Setup > | | | | | | | | |
| Reservations | | | | | | | | |
| S Facilitron Works | | | | | | | | |
| Support | | | | | | | | |
| 221 Other Accounts > | | | | | | | | |
| [→ Sign Out | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |

Next Up - COI auto verification and correction notifications

Go to Request Management Page

b.



17. Once you upload your COI the system will attempt to auto verify the document.

| rou will receive a confirmation email. 🖶 Print this pa | age fi | | | Bell . |
|--|--|------------------|--------------|---------|
| Request No. JXKD3W9NG9H4 | _ | | | |
| Blanket Use of Facility | | | | |
| Attendance: 25 | Coording 8 unlidating your COL | nlagon unit | | |
| Hillsborough County Public Schools Freedom High | h ser Scanning & validating your COI, | please wait | SAMPLE PHOTO | |
| Requested By: Parent Volunteer Organization (Jacki | Do not navigate away from this page, the | process may take | | |
| Classroom Standard Sa | at, Ap up to 02:55 minutes. | it | ion Details | |
| | | Custodial S | upplies | \$53.27 |
| | | Custodial S | upplies | |

18. If your COI is valid, you will receive this pop-up message: 🕹



19. If you document was not able to be auto verified and must be reviewed by a team member to manually verify or it is invalid, you will receive this pop-up message: 🗐



20. If your insurance was not able to be verified automatically and must be manually reviewed by a team member you will receive this email until they review and respond.

| | Hi Jackie, | | | | | | | |
|----|---|----------|----------|----------|------|--|--|--|
| | On 04/11/2025 at 12:05 am EDT, you uploaded a certificate of insurance for your upcoming reservation(s) at Hillsborough County Public Schools. | | | | | | | |
| | Details about your reservation can be found here | | | | | | | |
| | Thank you for uploading your insurance. A member of our Sup with details on next steps. | port tea | m will I | be in to | ouch | | | |
| | Thank you, The Facilitron Team | | | | | | | |
| - | We bring communities and spaces together. 1-800-272-2962 support@faciilfron.com | | | | | | | |
| d. | | | | | | | | |



21. If your COI is invalid, you will receive an email listing the corrections that must be made.

Invalid insurance. Please update immediately for Blanket Use of Facility



а.

| Possible Mistakes | How to Fix |
|---|--|
| Wrong Document Type – Usually when you upload your policy receipt containing your payment and the full policy details. If your policy you are uploading is more than 2 pages, it is most likely the incorrect document. | Ask your insurance provider to supply you with your Certificate of Insurance with the additionally insured endorsement. |
| Insured Name incorrect | Have your insurance carrier change insured name in the upper section of the certificate to your organizations name |
| Certificate Holder information missing or incorrect. This must be listed as our district's name and home office address | Have your insurance carrier change Certificate Holder's name in the lower left section of the certificate to Hillsborough County Public Schools 901 E. Kennedy Blvd. Tampa, FL. 33602 |
| Additional Insured Endorsement missing. Certificate must say "HCPS is additionally insured) in the Description of Operation box or have a separate additionally insured endorsement page | Have your insurance carried add Hillsborough County Public Schools as additionally insured to your policy |
| Missing Signature | Have your insurance carrier provide a signed (by the insurance agent) document back to you |
| Insurance expires before event starts/ends | Check your dates on your request and/or COI |



22. Once corrects have all successfully made you will receive this email:



- 23. Now the school must accept your request
- 24. Once the school accepts, your request it will be moved to the next approval process where the following will be reviewed:
 - **a.** Any documents uploaded, COI not auto verified, 501-C Tax exemptions etc.
 - **b.** IRS and/or parent organization compliance
 - c. Any notes in the comment section from school are addressed
 - d. Your Blanket Use of Facility agreement will be made audit ready for your school
- 25. A permit will be issued 😳
 - a. Note: If at any time the district is notified that your unit/organization is out of compliance with your parent organization your permit will be suspended or revoked until all compliance has been satisfied. You will be notified via email from noreply@facilitron.com if this happens.
- 26. You will be required to complete this process each year when you renew your COI.

Thank you!



Hillsborough County Council PTA/PTSA Resources

How to contact Hillsborough County Council PTA/PTSA for concerns of compliance or have other questions regarding by-laws, board officers, membership, 990's, 501-C or other IRS questions? Reach out to Hillsborough County Council PTA/PTSA.

Below are the HCC PTA/PTSA Officer Emails

- president@hccptaptsa.org
- vptraining@hccptaptsa.org
- treasurer@hccptaptsa.org
- vpareas@hccptaptsa.org

HCC PTA/PTSA Homepage: https://www.hccptaptsa.org

Compliance Checklist: https://www.hccptaptsa.org/compliance-checklist

Training Resources: https://www.hccptaptsa.org/pta/ptsa%20training%20resources

FL PTA Kit of Materials: <u>https://www.hccptaptsa.org/kit-of-materials</u>

PTA Facilitron Instructions: <u>https://www.hccptaptsa.org/facilitron</u>

New or Restarting Unit: <u>https://www.hccptaptsa.org/new-or-restart-unit</u>

New/Returning Officers Form: https://www.floridapta.org/new-or-returning-officers-form/

PTA Meeting Rules: <u>https://www.hccptaptsa.org/pta-meeting-rules</u>

Find Your PTA Unit's Status: <u>https://www.floridapta.org/find-your-local-pta/</u>

HCC PTA/PTSA Calendar: https://www.hccptaptsa.org/events

Membership: https://www.hccptaptsa.org/membership

Principal Resources: <u>https://www.hccptaptsa.org/principal-resources</u>

Contact Us: <u>https://www.hccptaptsa.org/community-happenings</u>