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FRANKLIN TOWNSHIP BOARD OF EDUCATION P.O. Box 368, Rt. 579							
Quakertown, New Jersey 08868							
FACILITY USE APPLICATION							
PTA 20148 Grade Committee Please Circle One: (1) 11 111							
Name of Organization/Sponsoring Organization Class of Organization (According to Policy)							
Michelle Keitel 156B Kiver Rd Annandal 088019082007409							
Responsible Party Street Address Town Zip Phone#							
Alternate Responsible Party Street Address Town Zip Phone#							
REQUESTS FOR USE MUST BE RECEIVED BY: FACILITY REQUESTED:							
July 1 For School Year Activity Sept-June New APR/Old APR Baseball Field							
July 1 Fall Sports Season Sept-Dec Classroom(s) # Soccer Field							
Nov. 1 Winter Sports Season Jan-Mar Gymnasium Softball Field	ν.						
Feb. 1 Spring Sports Season Apr-June May 1 Summer Use July-Aug Other Parthing Lot (front of school)							
Pairs agent for a contract a contract of a destruction							
ACTIVITIES COLLEGE COLLEGED -1105027							
electric -							
FACILITIES MODIFICATION (decorations, more furniture):							
Date(s) Requested Day(s) of Week Hours # Participants # Others							
512 + FAN Sato + RAM 10-4 30+							
 Applicant has received and read Board of Education Policy pertaining to Use of School Facilities and agrees to abide by rules and regulations. Yes/_No 							
Does this activity require waiving of any Board policies? YesNo	YesNo						
Are any games of chance being held? YesNo_X							
If yes, State Reg. # Local Permit #							
CERTIFICATE OF INSURANCE ATTACHED (OR COPY) YesNo							
Franklin Township Board of Education must be named in the users insurance policy as an additional insured.							
 The above-named organization complies with Federal and State anti-discriminatory laws. 							
 The applicant understands the Board assumes no responsibility for damage to persons, equipment or vehicles related to the fur The Board's insurance does not apply to groups and their members using the school facilities. 	nction.						
 At the end of each activity the custodian is to be notified of any appropriate repairs. 							
• THIS ACTIVITY MAY BE CANCELLED DUE TO SCHOOL NOT BEING IN SESSION, OR IF A BLACK SEAL CUSTODIAN CANNOT							
BE IN ATTENDANCE WHEN REQUIRED.							
Signature of Applicant							
Action Taken by Board of Education on: Date ApprovedNot Approved							
Superintendent or Designee Date							
Comments:							
Revised: 8/1/11							