#### FRANKLIN TOWNSHIP BOARD OF EDUCATION P.O. Box 368, Rt. 579 Quakertown, New Jersey 08868

Franklin Towns				Circle One:				
Name of Organization/Sponsoring C	1 · ·	• •	Class of	Organization	(According to	o Policy)		
Joanne Flylanc					<u> </u>	<u> </u>		
Responsible Party	Street Addres	s	Town	Zip		Phone#		
Alternate Responsible Party	Street Addres	S	Town	Zip	<u>.</u>	Phone#		
FACILITY REQUESTED:								
	Baseball Field		Other					
Old APR rainy days	Soccer Field							
Classroom(s) # _/ S	Softball Field $\underline{\nu}$	_	Weeken (\$30 per	d Custodian Ne	eded: Yes _			
Gymnasium S	Solar Field		(400 po.		No _			
PURPOSE: to give	townskip utdoor g	chil ames	dver , cri	<u>7 07 GA</u> 145	nized	pla	rej	
EQUIPMENT (in house/supplied):_	· · · · ·	<u></u>						
FACILITIES MODIFICATION (decor	ations, more furnitur	e):		<i></i>				
				· · ·				
Date(s) Requested	Day(s) of Week	Hours		# Participants	#C	thers		
July 10-21 8	30-12-30	8°30-1	12:30	150			. «_ <sup>*</sup>	-
/	1-F							
<ul> <li>Applicant has received and read Be regulations.</li> </ul>	pard of Education Polic	y pertaining	to Use o		es and agrees	s to abide	e by rules and	
<ul> <li>Does this activity require waiving or</li> </ul>	fany Board policies?			Yes_	No			
Are any games of chance being he	ld?			Yes_	No			
If yes, State Reg. #	Loca	al Permit #_	<b>-</b>					, , , , , , , , , , , , , , , , , , , ,
· CERTIFICATE OF INSURANCE A	TTACHED (OR COPY	)		Yes_	No_C	n ree	cord at	founship
Franklin Township Board of Educat	ion must be named in	lhe users in:	surance p	olicy as an addi	itional insure	1, <i>DU</i>	Ild ing	
CERTIFICATE OF INSURANCE A     Franklin Township Board of Educat     The above-named organization cor	nplies with Federal and	d State anti-o	discrimina	atory laws.				
<ul> <li>The applicant understands the Bo The Board's insurance does not ap</li> </ul>	ard assumes no respo	onsibility for	damage	to persons, equ				
<ul> <li>At the end of each activity the custo</li> </ul>								
THIS ACTIVITY MAY BE CANCE		OL NOT BE	ing in s	ESSION, OR I	F A BLACK	SEAL CI	USTODIAN CAN	NOT
BE IN ATTENDANCE WHEN REQ					107			,
Signature of Applicant	www-			Date		· · ·		
Action Taken by Board of Education of	n Date		Approved	i Not Ar	proved			
Action Takes by Doard of Education C			<u>, , , , , , , , , , , , , , , , , , , </u>		provid			
Superintendent or Designee	•••• • · · · · · · · · · · · · · · · ·	Date						
Comments:								
Baulandi, Ostabor 2016								

	FRA	NK	LIN TOWNSHIP BOARD OF EDUCAT	101
			P.O. Box 368, Rt. 579	
	:		Quakertown, New Jersey 08868	. •
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		P.O. Box 368, Rt. Quakertown, New Jers			· · · · · ·
				01 C3	
A CONTRACT		FACILITY USE APPLI	CATION 5		
Hunterdon Hoo	os	Pleas	e Circle One:		
Name of Organization/Sponso	ring Organization	Class	of Organization (	According to Policy)	
Hoson House	u				
Responsible Party	Street Add	dress Town	Zip	Phone#	
Katie Techine					
Alternate Responsible Party	Street Add	tress Town	U Zip	Phone#	
FACILITY REQUESTED:					
New APR	Baseball Field	Other			
Old APR	Soccer Field				
Classroom(s) #	Softball Field	Week	end Custodian Need	ded: Yes <u>×</u>	
Gymnasium	Solar Field	(\$30 )	per hour)	No	
				NO	
PURPOSE: BOX LASA	Koumane	<b>.</b>	n an an Arrison († 1915) - Arrison Arrison		
				an a	
	sciste toall	1/1	n an	· · · · · · · · · · · · · · · · · · ·	
EQUIPMENT (in house/supplie	ed): <u>Deachers</u>	out/table@	bront jore	nty/chan	3 for teams
FACILITIES MODIFICATION (d	lecorations, more furn	lture):			
Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others	* *
	<u> </u>	1 0	~~ <b>~</b> ~		1. 1.
4/22	Jat	Tam-Son	52	20	
4123	Sun	Jan- Bry	SD A	20	. <b>*</b>
Applicant has excelved and re-	ad Read of Education I		-4 0-L1 Cimi		
<ul> <li>Applicant has received and re- regulations.</li> </ul>	au Dualu ul Euucalum F	oncy pertaining to Use	Ves	and agrees to ablue	oy rules and
· Does this activity require waiv	ing of any Board policie	as?	Yes	NoX	
<ul> <li>Are any games of chance bein</li> </ul>	a heid?		Yes	NoX	
if yes, State Reg. #		.ocal Permit #			
· CERTIFICATE OF INSURAN		· · · · · · · · · · · · · · · · · · ·	Yes	No	
and the second					
Franklin Township Board of Ec				onal insured.	
<ul> <li>The above-named organization</li> </ul>	complies with Federal	and State anti-discrim	natory laws.		• •
The applicant understands the	e Board assumes no re	sponsibility for damag	e to persons, equip	ment or vehicles re	stated to the function.
The Board's insurance does no			and the second se	· ·	
<ul> <li>At the end of each activity the </li> </ul>	custodian is to be notifie	ed of any appropriate re	epairs.	· .	
	ICELLED DUE TO SC	HOOL NOT BEING IN	SESSION, OR IF	A BLACK SEAL C	JSTODIAN CANNOT
BE IN ATTENDANCE WHEN			Mot		
Signature of Applicant	1		<u>'  ٦ </u> Date	17	· · · · · · · · · · · · · · · · · · ·
Action Taken by Board of Educat	lon on: Date	Approv	vedNot App	roved	
			<u></u>		
Superintendent or Designee	:	Date			
Comments:		······			
Revised: October 2016		-			
		an the second			
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FRANKLIN TOWNSHIP BOARD OF EDUCATION
P.O. Box 368, Rt. 579
Quakertown, New Jersey 08868

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### FACILITY USE APPLICATION

	FACILITY	JSE APPLICATION	
POCK DB / Cu Name of Organization/Sponsori	b Scout	Please Circle One: 1 II III Class of Organization (According to Policy)	
Name of Organization/Sponsor	ig Organization	- 44	
Joh Turek		Town Tip Dhono#	
Responsible Party	Street Address		1
Pliznbeth luc	<u>K</u>	Town Zip Phone#	
Alternate Responsible Party	Street Address		
FACILITY REQUESTED:	ب من المرابع التقويم	other theater Em-Auditorium	
New APR	Baseball Field		
Old APR	Soccer Field		
Classroom(s) #	Softball Field	Weekend Custodian Needad: Yes (\$30 per hour)	
Gymnasium	Solar Field	10	
PURPOSE:	-	monthly pack meetings	
ACTIVITIES:		· · · · · · · · · · · · · · · · · · ·	
	- toplas & chave	5	
EQUIPMENT (in house/supplie			
FACILITIES MODIFICATION (d	lecorations, more furniture):		
	Day(s) of Week Ho	ours # Participants # Others	
Date(s) Requested	Day(s) of week		
	•		
The 3rd Thu	oday of every mi	onth-60-70 20-30 for PALK meetings	>
Applicant has received and re	ad Board of Education Policy pert	aining to Use of School Facilities and agrees to abide by rules and YesNo	
regulations.	to a start Reard policies?	Yes No	
<ul> <li>Does this activity require wait</li> </ul>		Yes No	
<ul> <li>Are any games of chance being the set of t</li></ul>	ng held?		
If yes, State Reg. #	Local Per	mit #	
- CERTIFICATE OF INSURAN		YesNoY	
Centrin Township Poard of F	ducation must be named in the us	ers insurance policy as an additional insured.	
Franklin Township Doald of E	under and State	e anti-discriminatory laws.	
	on complies with Federal and State	ity for damage to persons, equipment or vehicles related to the funct	tion
The Board's insurance does i	not apply to groups and men mem	bers dailing the bonzen learning the	
<ul> <li>At the end of each activity the</li> </ul>	e custodian is to be notified of any		
THIS ACTIVITY MAY BE CA	NCELLED DUE TO SCHOOL N	ot being in session, or if a black seal custodian cann $1 19 17$	101
Signature of Applicant	VUUM-	Date	
Action Taken by Board of Fouc	ation on: Date A	ApprovedNot Approved	
Action Taken by Board of Add Carol O. F Superintendent or Designee	xterico	ate	

Comments:\_

XI.D.1.

FRANKLIN TOWNSHIP BOARD OF EDUCATION P.O. Box 368, Rt. 579 Quakertown, New Jersey 08868

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	ENESS, INC.		Circle One: I		
Name of Organization/Spons	oring Organization	Class of	of Organization (A	ccording to Policy)	
LORA W. JONES		<b></b>		Dhanat	
Responsible Party	Street Addre	ess Town	Zip	Phone#	
Iternate Responsible Party	Street Addre	ess Town	Zip	Phone#	
ACILITY REQUESTED:					
lew APR	Baseball Field	Other	1837 (NE·1	eoom School	HOUSE
	Soccer Field		1		-
lassroom(s) #	Softball Field	Weeke	nd Custodian Need	led: Yes	
	Solar Field	(\$30 pe	er hour)	No V	
lymnasium	Sulai Field			NO	
URPOSE: OPEN SCH	LAN LANGE TA T	HE CIMMMU	INTO TOOD T	72118	
URPOSE: OPEN JUN	ULRUDE ID II	THE HIS OT	A AVALAN	<u>ucs</u>	
CTIVITIES: SHUULUG	SCHOOLLIFE IN	10 MIL-17-		THOUS IF A N	LOU DAL
QUIPMENT (in house/supp			UTTED GIDI		The say
ACILITIES MODIFICATION	(decorations, more furnit	ure):			
Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others	
29 MAY 2017	MOUDAU	APPANY. W:20	Д	ET. GUESTS:	50
	MUIDITY,				
	MEMORINDAY	TU I: vopu			
Applicant has received and	read Board of Education Po	licy pertaining to Use			y rules and
regulations.		<u>_</u>	Yes_V	_No	
Does this activity require w	,	87	Yes	No	
Are any games of chance be			Yes	_No_	
		cal Permit #			L DE RENEWE
CERTIFICATE OF INSURA			Yes 🗸	No MA	L BE RENEWE 6H-29, 2017
Franklin Township Board of				onal insured.	
The above-named organiza	tion complies with Federal a	ind State anti-discrimir	atory laws.		
The applicant understands				oment or vehicles rela	ted to the function.
The Board's insurance does			•		
At the end of each activity the					
THIS ACTIVITY MAY BE O BE IN ATTENDANCE WHE		OOL NOT BEING IN	SESSION, OR IF	A BLACK SEAL CUS	TODIAN CANNOT
Anallan	111-	2	FEB 2011	7	
ignature of Applicant			Date	/	
	cation on: Date	Approv	ed Not App	roved	
ction Taken by Beard of Edu			· · · · · · · · · · · · · · · · ·		
ction Taken by Board of Edu					
-		Date			
ction Taken by Board of Edu uperintendent or Designee		Date			
uperintendent or Designee		Date			

XI.D.1.

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# FRANKLIN TOWNSHIP BOARD OF EDUCATION P.O. Box 368, Rt. 579 Quakertown, New Jersey 08868

PTA / Name of Organization/Sponsoring Organization		lease Circle One: lass of Organization	According to Policy)	_
Name of Organization/sponsoring Organization	<del>ت</del>		() () () () () () () () () () () () () (	
Dennie Inumann Pri Responsible Party Street A	Address T	own Zip	Phone#	-
Älternate Responsible Party Street A	Address T	own Zip	Phone#	-
FACILITY REQUESTED:				
New APR 🔀 Baseball Field	c	other		
Old APR Soccer Field	<del></del>			
Classroom(s) # Softball Field			Needed: Yes	
Gymnasium Solar Field		\$30 per hour)	No _>	
PURPOSE: READ ACROSS A	MERJIA 1	De. Seuse	BREAKFA	51
ACTIVITIES PREAMERST				_
EQUIPMENT (in house/supplied):AB(E	S OPENED	- 3 Servin	or tables s	et up
FACILITIES MODIFICATION (decorations, more fi			<u> </u>	_
	`			_
Date(s) Requested Day(s) of Week	Hours	# Participan	ts # Others	
3/2/17 Thursdon	1 630-9a	M TBD		-
	(			-
				<u>.</u>
<ul> <li>Applicant has received and read Board of Education regulations.</li> </ul>	on Policy pertaining to	Use of School Fac <b>Ye</b>		le by rules and
Does this activity require waiving of any Board po	licies?	Ye	sNo <u>〉</u>	
<ul> <li>Are any games of chance being held?</li> </ul>		Ye	sNo_ <i>_X</i>	
If yes, State Reg. #	Local Permit #			
· CERTIFICATE OF INSURANCE ATTACHED (OR	(COPY)	Ye	sNo	
Franklin Township Board of Education must be na	med in the users insu	rance policy as an a	dditional insured.	
The above-named organization complies with Fed	eral and State anti-dis	scriminatory laws.		
<ul> <li>The applicant understands the Board assumes n The Board's insurance does not apply to groups a</li> </ul>	o responsibility for dr nd their members usir	amage to persons, ng the school facilitie	equipment or vehicles es.	related to the fun
<ul> <li>At the end of each activity the custodian is to be no</li> </ul>				
THIS ACTIVITY MAY BE CANCELLED DUE TO BEIN ATTENDANCE WHEN REQUIRED.			R IF A BLACK SEAL (	CUSTODIAN CAN
		2/14	117	
Signature of Applicant		Da	te	
Action Taken by Board of Education on: Date	A	.pprovedNo	t Approved	
Superintendent or Designee	Date			
Comments:				
Revised; October 2016				

XI.D.1

## FRANKLIN TOWNSHIP BOARD OF EDUCATION P.O. Box 368, Rt. 579 Quakertown, New Jersey 08868

March Colored and the Monte of the	ing Organization		cle One: 1	II III ardina to Policy)
Name of Organization/Sponsor		Class of Cl	арансанон (400	oranig to Louoyy
Responsible Party	/ / Street Address	Town	Zip	Phone#
Responsible Faily	Gliect Address		••••••]•	
Alternate Responsible Party	Street Address	Town	Zip	Phone#
REQUESTS FOR USE MUST	BE RECEIVED BY:	FACILITY REQUES	STED:	
July 1 For School Ye	ear Activity Sept-June	New APR/Old APR	Baseball F	ield
July 1 Fail Sports Se	eason Sept-Dec	Classroom(s) #	Soccer Fie	ld
Nov. 1 Winter Sports	Season Jan-Mar	Gymnasium	Softball Fie	eld
Feb. 1 Spring Sports	Season Apr-June			
May 1 Summer Use	$\sim$ $\cdot$	Other		
PURPOSE: Sport	s Banquet			,
ACTIVITIES:	<u> </u>			
EQUIPMENT (in house/suppli	ed): <u>podium</u> , M	iccophone	, Smalt	board for slides
CACH ITIES MODIFICATION (	decorations, more furniture	all tar	DIES S	et op + Kitchen
PAGETTES MODIFICATION (		• <u>iii</u>		<u></u>
Date(s) Requested	Day(s) of Week	Hours #	Participants	# Others
	A )	115 -30		
5/31/17	W	40-800	150	
	<u>}</u>			
			about Excitizione am	d anymes to obide by poles and
	ead Board of Education Policy	pertaining to Use of S	ichool Facilities ar Yes <u> </u>	d agrees to abide by rules and o
regulations,		pertaining to Use of S	Yes <u>v</u> N	d agrees to abide by rules and o o
<ul><li>regulations.</li><li>Does this activity require wai</li></ul>	ving of any Board policies?	pertaining to Use of S	Yes <u>.</u> N YesN	0
<ul><li>regulations.</li><li>Does this activity require wai</li><li>Are any games of chance bei</li></ul>	ving of any Board policies? ng held?		YesN YesN YesN	o o
<ul> <li>regulations.</li> <li>Does this activity require wai</li> <li>Are any games of chance being the set of the set o</li></ul>	ving of any Board policies? ng held? Local	Permit #	YesN YesN YesN	o o
<ul> <li>regulations.</li> <li>Does this activity require wai</li> <li>Are any games of chance being the set of the set o</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY)	Permit #	YesN YesN YesN YesN	o o o Gn file
<ul> <li>regulations.</li> <li>Does this activity require wai</li> <li>Are any games of chance bein if yes, State Reg. #</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in th	Permit #	YesN YesN YesN YesN icy as an addition:	o o o Gn file
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? NCE ATTACHED (OR COPY) Education must be named in the complies with Federal and	Permit # ne users insurance pol State anti-discriminato	YesN YesN YesN YesN YesN icy as an additiona	$o_{}$ $o_{$
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and the Board assumes no respon	Permit # ne users insurance pol State anti-discriminato nsibility for damage to	YesN YesN YesN YesN icy as an additiona ry laws. persons, equipm	o o o Gn file
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and he Board assumes no respon not apply to groups and their r	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities.	$o_{$
<ul> <li>regulations.</li> <li>Does this activity require wait</li> <li>Are any games of chance being the second s</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in the on complies with Federal and he Board assumes no respon- not apply to groups and their re- e custodian is to be notified of	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities.	$o_{}$ $o_{}$ $o_{$
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and the Board assumes no respon- not apply to groups and their re- e custodian is to be notified of NCELLED DUE TO SCHOOL LREQUIRED.	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities.	$o_{$
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and he Board assumes no respon- not apply to groups and their re- e custodian is to be notified of ANCELLED DUE TO SCHOOL	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities. rs. SSION, OR IF A	$o_{}$ $o_{}$ $o_{$
<ul> <li>regulations.</li> <li>Does this activity require wal</li> <li>Are any games of chance being the second se</li></ul>	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and the Board assumes no respon- not apply to groups and their re- e custodian is to be notified of NCELLED DUE TO SCHOOL LREQUIRED.	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities.	$o_{}$ $o_{}$ $o_{$
regulations. Does this activity require wai Are any games of chance bei If yes, State Reg. # CERTIFICATE OF INSURAN Franklin Township Board of E The above-named organizatie The applicant understands th The Board's insurance does r At the end of each activity the BE IN ATTENDANCE WHEN	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in the on complies with Federal and the Board assumes no respon- not apply to groups and their re- e custodian is to be notified of ANCELLED DUE TO SCHOOL REQUIRED.	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair of NOT BEING IN SE	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities. s. SSION, OR IF A I Date	o         ent or vehicles related to the function         BLACK SEAL CUSTODIAN CANNO
regulations. Does this activity require wal Are any games of chance bei If yes, State Reg. # CERTIFICATE OF INSURAN Franklin Township Board of E The above-named organization The applicant understands the The Board's insurance does the At the end of each activity the THIS ACTIVITY MAY BE CAR BE IN ATTENDANCE WHEN Signature of Applicant	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in the on complies with Federal and the Board assumes no respon- not apply to groups and their re- e custodian is to be notified of ANCELLED DUE TO SCHOOL REQUIRED.	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair of NOT BEING IN SE	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm nool facilities. s. SSION, OR IF A I Date	o         ent or vehicles related to the function         BLACK SEAL CUSTODIAN CANNO
regulations. Does this activity require wal Are any games of chance bei If yes, State Reg. # CERTIFICATE OF INSURAN Franklin Township Board of E The above-named organization The applicant understands the The Board's insurance does the At the end of each activity the THIS ACTIVITY MAY BE CAR BE IN ATTENDANCE WHEN Signature of Applicant	ving of any Board policies? ng held? Local NCE ATTACHED (OR COPY) Education must be named in th on complies with Federal and he Board assumes no respon- not apply to groups and their re- e custodian is to be notified of ANCELLED DUE TO SCHOOL LREQUIRED. ation on: Date	Permit # ne users insurance pol State anti-discriminato nsibility for damage to nembers using the sch any appropriate repair nL NOT BEING IN SE Approved Date	YesN YesN YesN YesN icy as an additiona ory laws. persons, equipm noot facilities. rs. SSION, OR IF A Date Not Approv	o         ent or vehicles related to the function         BLACK SEAL CUSTODIAN CANNO

		Box 368, Rt. 579 n, New Jersey 08868		
	FACILITY	USE APPLICATION		
National Papri	ssis Foundation	Please Circle One:		
Name of Organization/Sponsor	ring Organization	Class of Organizatio	n (According to Policy)	
Chris Polansky				
Responsible Party (	Street Address	Town Zi	p Phone#	
Alternate Responsible Party	Street Address	Town Zi	p Phone#	
FACILITY REQUESTED:			11	
New APR	Baseball Field	Other Parkin	1 lot	
Old APR	Soccer Field	Į ·	5	
Classroom(s) #	Softball Field	Weekend Custodian	Needed: Yes	
Gymnasium	Solar Field	(\$30 per hour)	No	
Gynnasioni				
PURPOSE: rest stop	for Team NPF Cy	cle event in N.	5	
ACTIVITIES: Cyclists 4	vill be stopping for	Water/snach to	resk	
EQUIPMENT (in house/suppli	11 40 1 1	loxlo tent, to	bles, chieris, and 1.	-2 porte-toile
	00 /		, ,	·
FACILITIES MODIFICATION (	decorations, more furniture):	- //		
1				
Date(s) Requested	Day(s) of Week Ho	ours # Participar	ts # Others	
Date(s) Requested	Day(s) of Week Ho		its # Others	
Date(s) Requested	Fri	pm 0	its # Others	
Date(s) Requested 5/19/17 5/20/11	Day(s) of Week Ho Fn' 524. 62	pm 0	its # Others	
5/19/ <b>17</b> 5/20/1 <b>1</b> • Applicant has received and re	Fri	Pin 0 - 6p 200 aining to Use of School Fac	lities and agrees to abld	e by rules and
5/19/17 5/20/11 • Applicant has received and re regulations.	Fn' 527. 62 ead Board of Education Policy perta	Pin 0 - 6p 200 alining to Use of School Fac Ye	ilities and agrees to ablde	e by rules and
5/19/17 5/20/17 • Applicant has received and re regulations. • Does this activity require wait	Fri 527. 62 ead Board of Education Policy perta ving of any Board policies?	Pin 0 - 6p 200 atining to Use of School Fac Ye	ilities and agrees to ablde sNo sNo	e by rules and
5/19/17 5/20/17 • Applicant has received and re- regulations. • Does this activity require wal • Are any games of chance bei	Fn' 52F. 62 ead Board of Education Policy perta ving of any Board policies? ng held?	Pin 0 - 6p 200 aining to Use of School Fac Ye Ye	ilities and agrees to ablde sNo sNo	e by rules and
5/19/17 5/20/17 • Applicant has received and re- regulations. • Does this activity require wait • Are any games of chance bein If yes, State Reg. #	Fn' 52F. 62 ead Board of Education Policy perta ving of any Board policies? ng held? Local Perm	Pin 0 - 6 200 aining to Use of School Fac Ye Ye nit #	ilities and agrees to ablde sNo sNo sNo sNo	e by rules and
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XI.D.1.

FRANKLIN TOWNSHIP BOARD OF EDUCATION
P.O. Box 368, Rt. 579
Quakertown, New Jersey 08868

FTS PTA		Pleas	e Circle One:	$\cap$	111	_
Name of Organization/Sponsoring Organiza	tion		of Organizati		ding to Policy	)
Chad Klasna					<u> </u>	
Responsible Party	Street Address	Town	2	ίp	Phone	ŧ
Alternate Responsible Party	Street Address	Тоwп	Z	íip	Phone#	ŧ
REQUESTS FOR USE MUST BE RECEIVE	D BY:	FACILITY REC	QUESTED:			<i>a</i>
July 1 For School Year Activity	Sept-June	New APR/Old	APRE	aseball Fie	ld 🔨	Grassail
July 1 Fall Sports Season	Sept-Dec	Classroom(s) #	¥ ۲	loccer Field	_X	Gross are betuind
Nov. 1 Winter Sports Season	Jan-Mar	Gymnasium	S	oftball Field	l	sarod
Feb. 1 Spring Sports Season	Apr-June					
May 1 Summer Use	July-Aug	Other				_
PURPOSE: Fun fair						-
		vatts, gav	nes, to	od	1 ~	- 1-
EQUIPMENT (in house/supplied):	my puls	tibles,	, chair	S, CX	tension	_ cends
FACILITIES MODIFICATION (decorations			<i>1</i>			
FACILITIES MODIFICATION (deconditions	,	/- <u></u>				_
Date(s) Requested Day(s) of	of Week	Hours	# Participa	ints	# Others	_
June 6th 2017 Thes	day 8	<sup>l</sup> am-3pm	FTS, Str Facul	dents		_
June 13,2017 "		н	lt	<u> </u>	_ <b>, ,</b>	
<ul> <li>Applicant has received and read Board of regulations.</li> </ul>	Education Policy	pertaining to Use	e of School Fa Y	icilities and es <u>X</u> No	agrees to abi	de by rules and
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If yes, State Reg. #	Local	Permit #				<i>y</i> ) ~
CERTIFICATE OF INSURANCE ATTACH			Y	'esNo	XOV	line
Franklin Township Board of Education mu			o polícy as ar	additional	insured.	
<ul> <li>Franklin Township Board of Education mu</li> </ul>	ist be named in tr	te users insuranc	e policy da di			
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