XI.D.1.

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P.O. Box 368, Rt. 579 Quakertown, New Jersey 08868

	FACILITY USE APPLICATION		
	Dr. U. U.P. I Wh SWHS Please Circle One		
	Name of Organization/Sponsoring Organization Class of Organizat		
	STATTUREK		
	Responsible Party Street Address ) Town	Zip Phone#	
• •	Alternate Besponsible Party Street Address Town	Zip Phone#	
	REQUESTS FOR USE MUST BE RECEIVED BY: FACILITY REQUESTED:		
		Baseball Field	
		Soccer Field	
	Nov. 1 Winter Sports Season Jan-Mar Gymnasium	Softball Field	
	Feb. 1 Spring Sports Season Apr-June		
	May 1 Summer Use July-Aug Other 10 POLCO		
	PURPOSE: PINCULOR LP(DU & DILK & VO	a Dincer	
ACTIVITIES:			
	EQUIPMENT (in house/supplied): 1008 a 000		
	Date(s) Requested Day(s) of Week Hours # Particip	pants # Òthers	
i pridu -	530 COUNT	maging this date to be	
uproved = <u>3 3 11 + triduy</u> <u>5-e-4p 40 (4pp Roberood</u>		Hrstrenewood Gerby	
	515117 Friday 57-9040	BILLE 4010 DIMER	
	Applicant has received and read Board of Education Policy pertaining to Use of School F	Facilities and agrees to abide by rules and	
	regulations.	YesNO	
Does this activity require waiving of any Board policies?     YesNo      Are any games of chance being held?     YesNo		YesNo	
		YesNo	
	If yes, State Reg. # Local Permit #	Yes VNo - already handed	
· CERTIFICATE OF INSURANCE ATTACHED (CITOCITY)		ARGING MITH OF	
	<ul> <li>Franklin Township Board of Education must be named in the users insurance policy as a</li> </ul>	an additional insured.	
	<ul> <li>The above-named organization complies with Federal and State anti-discriminatory laws</li> </ul>	The above-named organization complies with Federal and State anti-discriminatory laws.	
	<ul> <li>The applicant understands the Board assumes no responsibility for damage to persons, equipment or vehicles related to the function.</li> <li>The Board's insurance does not apply to groups and their members using the school facilities.</li> </ul>		
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     BEIN ATTENDANCE WHEN REQUIRED			
		I, OR IF A BLACK SEAL CUSTODIAN CANNOT	
		21.1.7.	
	CIRCIDIUMO S		
	Signature of Applicant		
	Action Taken by Board of Education on: Date Approved	Not Approved	
	Superintendent of Designee Date		
	Superintendent or Designee     Date       Comments:     Image: Comments:       Revised:     8/1/11		

i.

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

FACILITY USE APPLICATION			
TA MATHORS Dy Plant Sale Please Circle One: DI III PTA			
Name of Organization/Sponsoring/Organization Class of Organization (According to Policy)			
Ferninda DeCabo			
Responsible Party Street Address Town Zip Phone#			
Kim Muller			
Alternate Responsible Party Street Address			
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			
Feb. 1 Spring Sports Season Apr-June Outside ongrass between upstairs			
May 1 Summer Use July-Aug Other Main entrance and library by old front			
PURPOSE: Mother's Day Plant Jall entrance			
ACTIVITIES: plant sate			
EQUIPMENT (in house/supplied): 8 tables and 4 chairs to be set up			
between library and frontentrance on grass FACILITIES MODIFICATION (decorations, more furniture):			
Date(s) Requested Day(s) of Week Hours # Participants # Others			
Factary 5/12/17 Friday 8-2 6-8 (2000005 Studients			
<ul> <li>Applicant has received and read Board of Education Policy pertaining to Use of School Facilities and agrees to abide by rules and</li> </ul>			
<ul> <li>Applicant has received and read Board of Education Policy pertaining to boo of School Participations.</li> <li>Yes <u>Ves</u></li> </ul>			
Does this activity require waiving of any Board policies?     YesNo			
Are any games of chance being held?     YesNo			
If yes, State Reg. # Local Permit #			
CERTIFICATE OF INSURANCE ATTACHED (OR COPY)     Yes No			
<ul> <li>Franklin Township Board of Education must be named in the users insurance policy as an additional insured.</li> </ul>			
The above-named organization complies with Federal and State anti-discriminatory laws.			
<ul> <li>The applicant understands the Board assumes no responsibility for damage to persons, equipment or vehicles related to the function.</li> </ul>			
The Board's insurance does not apply to groups and their members using the school facilities.			
<ul> <li>At the end of each activity the custodian is to be notified of any appropriate repairs.</li> </ul>			
· THIS ACTIVITY MAY BE CANCELLED DUE TO SCHOOL NOT BEING IN SESSION, OR IF A BLACK SEAL CUSTODIAN CANNOT			
BE IN ATTENDANCE WHEN REQUIRED.			
Altranta Jolabie			
Action Taken by Board of Education on: DateApprovedNot Approved			
Data			
Superintendent or Designee Date			
Comments:			
Revised: 8/1/11			