## FRANKLIN TOWNSHIP BOARD OF EDUCATION

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

## FACILITY USE APPLICATION Must be received no later than 2 weeks prior to the BOE meeting.

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Brownie Troop,	81292	Please Circle O		
Name of Organization/Sponsori		Class of Organi		
	+ OF NJ			500.1090
Responsible Party	Street Addre	, n	Zip (m.).	Phone#
Katie Blew	Street Addre	ak Grove Rd Pb	Hotown, M	<u>) 0886</u> 7
Alternate Responsible Party	Street Adure:		Zip	FIIOH <del>O#</del>
FACILITY REQUESTED:		Rrv	14125	
New APR	Baseball Field	Other <del>+</del>	FORM	<u>Xay</u> ground
Old APR	Soccer Field	·		0
Classroom(s) #	Softball Field	Weekend Custo (\$30 per hour)	dian Needed: Yes	
Gymnasium	Solar Field		No	$\Sigma$
PURPOSE: Monthly	1	( ; )		
ACTIVITIES: MONTH	4 Girl GOUT	Meetings	<u> </u>	<u>,</u>
EQUIPMENT (in house/supplie	a): play grom			
FACILITIES MODIFICATION (de	ecorations. more furnitu	re): None		
		,		<u> </u>
Date(s) Requested	Day(s) of Week	Time (include set-up & break-down if applicable)	# Participants	# Others
1117 12 5, 1 2	Tues	afterschool-5pm	10-12	
alle alle ulio ali		<u></u>		
	· · · · · · · · · · · · · · · · · · ·		· ···· ··· ·	· · · · · · · ·
<ul> <li>Applicant has received and rear regulations.</li> </ul>	ad Board of Education Poli	cy pertaining to Use of Schoo	Yes_X_No	
Does this activity require waivi	ng of any Board policies?		YesNo_>>>	_
<ul> <li>Are any games of chance bein</li> </ul>	g held?		YesNo	_
lf yes, State Reg. #	Loc	al Permit #	<b></b>	
· CERTIFICATE OF INSURANC		<u>~</u>	YesNo	-
Franklin Township Board of Ed	lucation must be named a	s the certificate holder, minimu	um \$1,000,000 cove	rage.
The above-named organization	complies with Federal ar	d State anti-discriminatory lav	vs.	
-				vahislas related to the function
The applicant understands the The Board's insurance does not				
At the end of each activity the of	custodian is to be notified	of any appropriate repairs.		
• THIS ACTIVITY MAY BE CAN BE IN ATTENDANCE WHEN I		OOL NOT BEING IN SESSIO	N, OR IF A BLACK	SEAL CUSTODIAN CANNOT
			101	$\left(1\right)$
Signature of Organization Officer			Date	
Action Taken by Board of Educat				
	ion on: Date	Approved	_Not Approved	
Superintendent or Designee	ion on: Date	Approved	_Not Approved	

Revised: August, 2017

Comments:\_\_\_\_\_

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

		<u>F</u> Must be received ne	ACILITY USE AP		the BOE meeting.		
FRANKL	in Twp	Recreat		lease Circle (	~		
Name of Organizati	· · · · · · · -			lass of Organ	ization (Accordin	g to Policy)	R
MARIC	MRON	216 Sid		41.5	NT 9	08 500	8448
Responsible Party	····• <b>* ····</b> ····	Street Addr		own	Zip	Phone#	
Alternate Responsib	le Party	Street Addr	ess To	own	Zip	Phone#	
FACILITY REQUES	TED:						
New APR	×	Baseball Field		ther			
Old APR		Soccer Field					
Classroom(s) #		Softball Field	w	eekend Custo	odian Needed: Yes	X	
Gymnasium	x	Solar Field		30 per hour)			
PURPOSE: R	ec BA.	sketbace			NO	·	
	Baskoth	all cames	and n	encties			
		ALL GAMES TABLE, S	CARP BUD	rad an	Siter		
	ise/supplied):				JATUROF	95	
FACILITIES MODIFI	CATION (deco	prations, more furnit	ure):	·····	<b>_</b>		
·····					· · · · · · · · · · · · · · · · · · ·		
Date(s) Reque		Day(s) of Week	Time (include s	ommliand lat	# Participants	# Other	
m 11/20/17 3/	22/2018 70	ic wed Thue	7-9	applioubic)	20	5	
n 12/16/17 3/1	1/1B	SAT	9-4		50	50	
m 11/2.0/17 3/ m 12/16/17 3/1 p. 17/20/17 3 Applicant has receir regulations.				Jse of Schoo		es to abide b	y rules and
<ul> <li>Does this activity re</li> </ul>			?		YesNo	_	
<ul> <li>Are any games of c</li> </ul>					YesNo	_	
If yes, State Reg. 4	#	Lo	cal Permit #			~ , , ,	
CERTIFICATE OF		,	,			_(will b	e seal
<ul> <li>Franklin Township f</li> </ul>	Board of Educa	ition must be named a	as the certificate h	older, minimu	ım \$1,000,000 cov	erage.	
<ul> <li>The above-named of</li> </ul>	organization co	mplies with Federal a	nd State anti-disci	riminatory law	/s.		
<ul> <li>The applicant unde The Board's insurar</li> </ul>	rstands the Bo nce does not ap	pard assumes no resp oply to groups and the	oonsibility for dan ir members using	hage to perso the school fa	ons, equipment or	vehicles relat	ed to the fur
At the end of each a			•				
	Y BE CANCE	LLED DUE TO SCHO			N, OR IF A BLACI	SEAL CUST	ODIAN CAP
	ce when Reg	UIRED.			el-	al	
Signature of Organizat	tion Officer				9/2e	<i>• [1]</i>	
Action Taken by Board	_	on: Date	Арр	roved	_Not Approved		
Superintendent or Des	idhee				• •		
	agi loo		Date				
Comments;							

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#### FRANKLIN TOWNSHIP BOARD OF EDUCATION

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

# FACILITY USE APPLICATION Must be received no later than 2 weeks prior to the BOE meeting.

Hustle Basketball /		Please Circle	e One: I II	III
Name of Organization/Sponso KEvin McCarron 9 Sa		Class of Orga	anization (According	
Responsible Party	Street Addres	ss Town '	Zip	Phone#
Alternate Responsible Party	Street Addres	ss Town	Zip	Phone#
FACILITY REQUESTED:				
New APR	Baseball Field	Other		
	Soccer Field			,
Classroom(s) #	Softball Field		stodian Needed: Yes	
Gymnasium	Solar Field	(\$30 per hour	r) No	X
PURPOSE: Basketball p	ractice			
ACTIVITIES: Basketball		**************************************		
ACILITIES MODIFICATION (	decorations, more furnitur	re);	· · · · · · · · · · · · · · · · · · ·	
Date(s) Requested	Day(s) of Week	Time (include set-up & break-down if applicable)	# Participants	# Others
10/1/17-6/20/18-	Monday thru and		15	
10/23/17 - 6/1/18	Friday	6:30-9:30		
Applicant has received and re regulations. Does this activity require wai	ving of any Board policies?		Yes <u>x</u> No YesNo_ <sup>X</sup>	-
Are any games of chance be	-		YesNð	_
If yes, State Reg. #	Loca	al Permit #		
CERTIFICATE OF INSURAN			Yes <sup>X</sup> No	_
Franklin Township Board of E				erage.
The above-named organization	on complies with Federal and	d State anti-discriminatory h	aws.	
The applicant understands the Board's insurance does read	e Board assumes no respo not apply to groups and their	onsibility for damage to pe members using the school	rsons, equipment or I facilities.	vehicles related to the fun
At the end of each activity the	custodian is to be notified o	of any appropriate repairs.		
THIS ACTIVITY MAY BE CA BE IN ATTENDANCE WHEN	REQUIRED	OL NOT BEING IN SESSI	<b>ON, OR IF A BLACK</b> 9/26/17	
ignature of Organization Office			Date	
ction Taken by Board of Educa	ution on: Date	Approved	Not Approved	
uperintendent or Designee		Date		
omments:				
evísed: August, 2017				

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

6	firl Scout		CILITY USE APPLICATION later than 2 weeks prior to t	the BOE meeting,		
ت		ring Organization	Class of Organ	Dine: I II II ization (According	ll to Policy)	`, `
	Acqueline B Responsible Party Robin Cctanio I Alternate Responsible Party	Carlley 184 Laux Street Addre OBAILEASCOLA Street Addre	of Rd Fleming to	Zin	N) 068-35 (90 Phone# 2 (908) 217- Phone#	· · · ·
	FACILITY REQUESTED:					
	New APR	Baseball Field	Other			-
	ON APR	Soccer Field				
	Classroom(s) # 125	Softball Field		odian Needed: Yes		
	Gymnasium	Solar Field	(\$30 per hour)	No _	$\checkmark$	
	PURPOSE: GILL Stor	it meeting				
	ACTIVITIES: Q1+5+ C	lafts -				
	EQUIPMENT (In house/suppl)	eo): table (cl	nairs			-
	FACILITIES MODIFICATION (	decorations, more furnitu	re): <u>NIA</u>			
	Date(s) Requested	Day(s) of Week	Time (include set-up & break-down if applicable)	# Participants	# Others	
3	of month	Thuisdays	6:30.8:00pm	12-14	Ð	
	<ul> <li>Applicant has received and re regulations.</li> </ul>	ad Board of Education Pol	icy pertaining to Use of Schoo	Facilities and agree	is to abide by rules ar	d
	Does this activity require waiv	ing of any Board policies?		Yes <u>No</u>		
	Are any games of chance bei	-		YesNo		
	If yes, State Reg. #			7		
	CERTIFICATE OF INSURANCE		-	Yes_/_No		
	Franklin Township Board of E				age.	
	<ul> <li>The above-named organizatio</li> </ul>	n complies with Federal an	id State anti-discriminatory lav	¥S.		
	<ul> <li>The applicant understands th The Board's insurance does n</li> </ul>	e Board assumes no resp ot apply to groups and the	onsibility for damage to pers r members using the school fa	ons, equipment or v acilities.	chicles related to the	function.
	At the end of each activity the	custodian is to be notified	of any appropriate repairs.			
/	• THIS ACTIVITY MAY BE CA		OL NOT BEING IN SESSIO	N, OR IF A BLACK	SEAL CUSTODIAN	CANNOT
L	pacquelico p	madley.	·	9/18/1	/	
	Signature di Organization Office			Date		
	Action Taken by Board of Educa	tion on: Date	Approved	Not Approved		
	Superintendent or Designee	· · · · · · · · · · · · · · · · · · ·	Date			·
	Comments:		·····	/ 12 AU 10		
	Revised: August, 2017					

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

FACILITY USE APPLICATION

r 0.		<u>o later trian 2 w</u>	eeks prior to t	he BOE meeting.	
TS PTA /			Please Circle C	me: DI	NI
Name of Organization/Sponso	oring Organization		Class of Organ	ization (According	to Policy)
Pacque line Brad	<u>ey 184 Lowel (</u> Sireet Addr		<u>kcl. F (PnC</u> Town	htown NJDY Zip	<u>&lt;835</u> (908)962 Phone#
Alternate Responsible Party	Street Addr	ess	Town	Zip	Phone#
FACILITY REQUESTED:					
New APR	Baseball Field		Other LID	riy	
Old APR	Soccer Field			r	
Classroom(s) #	Softball Field		Weekend Custo	xdian Needed: Yes	—
3ymnasium	Solar Field	(	(\$30 per hour)	No	/
PURPOSE: PTA Mee	<u>ting</u>				
ACTIVITIES: Meetin	-				
- EQUIPMENT (in house/suppli	ied): Tables (	chairs			
ACIEITIES MODIFICATION (	decorations, more infiniti	ure): (\) \			,
Date(s) Requested	Day(s) of Week	Time (include break-down i		# Participants	# Others
st Thuisday Pach month	Thursday	7:00-	9:00pm	10-20	Ð
		······································			
regulations.			o Use of Schoo	Yes No	es to abide by rules and
regulations. Does this activity require wah	ving of any Board policies?		o Use of Schoo	Yes No Yes No /	es to abide by rules and
regulations. Does this activity require wah Are any games of chance bei	ving of any Board policies? ing held?	?	o Use of Schoo	Yes No	es to abide by rules and
regulations. Does this activity require wah Are any games of chance bei If yes, State Reg. #	ving of any Board policies? ing held? Lo	cal Permit #	o Use of Schoo	Yes <u>Vo</u> Yes <u>No</u> Yes <u>No</u>	es to abide by rules and
regulations. Does this activity require wah Are any games of chance bei If yes, State Reg. # CERTIFICATE OF INSURANCE	ving of any Board policies? ing held? Lo CE ATTACHED (OR COP	? cal Permit # Y)		Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> Yes <u>No</u>	
regulations. Does this activity require wath Are any games of chance being the set of th	ving of any Board policies? ing held? Lo CE ATTACHED (OR COP iducation must be named a	? cal Permit # Y) as the certificate	holder, minimu	Yes No Yes No Yes No Yes No Yes No	
regulations. Does this activity require wath Are any games of chance bein if yes, State Reg. # CERTIFICATE OF INSURANCE Franklin Township Board of E The above-named organization	ving of any Board policies? ing held? Lo CE ATTACHED (OR COP iducation must be named a on complies with Federal a the Board assumes no res	? cal Permit # Y) as the certificate nd State anti-dis ponsibility for da	holder, minimu scriminatory lav	Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> um \$1,000,000 cove vs.	rage.
regulations. Does this activity require wath Are any games of chance bein if yes, State Reg. #	ving of any Board policies? ing held? CE ATTACHED (OR COP iducation must be named a on complies with Federal a the Board assumes no resp not apply to groups and the	cal Permit # Y) as the certificate nd State anti-dis ponsibility for da elr members usin	holder, minimu scriminatory lav amage to persi ag the school fa	Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> Yes <u>No</u> um \$1,000,000 cove vs.	rage.
regulations. Does this activity require wath Are any games of chance bein if yes, State Reg. #	ving of any Board policies? ing held? CE ATTACHED (OR COP iducation must be named a on complies with Federal a the Board assumes no res not apply to groups and the custodian is to be notified NCELLED DUE TO SCH	cal Permit # Y) as the certificate nd State anti-dis ponsibility for d ir members usir of any appropri	holder, minimu scriminatory lav amage to persu ng the school fa ate repairs.	Yes No Yes No Yes No Yes No Yes No Yes No um \$1,000,000 cove vs. ons, equipment or v collities.	rage. rehicles related to the fun
regulations. Does this activity require wath Are any games of chance bein if yes, State Reg. #	ving of any Board policies? ing held? CE ATTACHED (OR COP iducation must be named a on complies with Federal a the Board assumes no res not apply to groups and the custodian is to be notified NCELLED DUE TO SCH	cal Permit # Y) as the certificate nd State anti-dis ponsibility for d ir members usir of any appropri	holder, minimu scriminatory lav amage to persu ng the school fa ate repairs.	Yes No Yes No Yes No Yes No Yes No Yes No um \$1,000,000 cove vs. ons, equipment or v collities.	rage. rehicles related to the fun
regulations. Does this activity require wath Are any games of chance bein if yes, State Reg. #	ving of any Board policies? ing held? Lo CE ATTACHED (OR COP iducation must be named a on complies with Federal a the Board assumes no res not apply to groups and the custodian is to be notified NCELLED DUE TO SCHO REQUIRED.	cal Permit # Y) as the certificate nd State anti-dis ponsibility for d ir members usir of any appropri	holder, minimu scriminatory lav amage to persu ng the school fa ate repairs.	Yes No Yes No Yes No Yes No Yes No Yes No um \$1,000,000 cove vs. ons, equipment or v collities.	rage. rehicles related to the fun
regulations. Does this activity require wath Are any games of chance being if yes, State Reg. # CERTIFICATE OF INSURANCE Franklin Township Board of E The above-named organization The applicant understands the The Board's insurance does no At the end of each activity the THIS ACTIVITY MAY BE CA BE IN ATTENDANCE WHEN COLLOND gnature of Organization Office	ving of any Board policies? ing held? Lo- CE ATTACHED (OR COP iducation must be named a on complies with Federal a te Board assumes no res tot apply to groups and the custodian is to be notified NCELLED DUE TO SCHO REQUIRED. JUDDIES JUDDIES JUDDIES JUDDIES JUDDIES	cal Permit # Y) as the certificate nd State anti-dis ponsibility for da ir members usin of any appropri- OOL NOT BEIN	holder, minimu scriminatory lav amage to persu ng the school fa ate repairs.	Yes No Yes No Yes No Yes No Yes No Yes No um \$1,000,000 cove vs. ons, equipment or v collities.	rage. rehicles related to the fun
regulations. Does this activity require wath Are any games of chance bein If yes, State Reg. # CERTIFICATE OF INSURANCE Franklin Township Board of E The above-named organization The applicant understands the The Board's insurance does no At the end of each activity the THIS ACTIVITY MAY BE CA BE IN ATTENDANCE WHEN DC: Que limb	ving of any Board policies? ing held? Lo- CE ATTACHED (OR COP iducation must be named a on complies with Federal a te Board assumes no res tot apply to groups and the custodian is to be notified NCELLED DUE TO SCHO REQUIRED. JUDDIES JUDDIES JUDDIES JUDDIES JUDDIES	cal Permit # Y) as the certificate nd State anti-dis ponsibility for da ir members usin of any appropri- OOL NOT BEIN	holder, minimuscriminatory lav amage to persu ang the school fa ate repairs. IG IN SESSIO	Yes No Yes No Yes No Yes No Yes No Yes No um \$1,000,000 cove vs. ons, equipment or v collities.	rage. rehicles related to the fun