

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.

FTS PTA Class of 2017 Please Circle One: (I) II III
 Name of Organization/Sponsoring Organization Class of Organization (According to Policy)
Jenni Peterson 140 Sidney Road Annandale 08801 908-319-3618
 Responsible Party Street Address Town Zip Phone#
 Alternate Responsible Party Street Address Town Zip Phone#

FACILITY REQUESTED:

New APR _____ Baseball Field _____ Other Parking Lot
 Old APR _____ Soccer Field _____
 Classroom(s) # _____ Softball Field _____ Weekend Custodian Needed: Yes _____
 (\$30 per hour) No _____
 Gymnasium _____ Solar Field _____

PURPOSE: Fundraising for Activities of Account for Class of 2017

ACTIVITIES: Car Wash

EQUIPMENT (in house/supplied): _____

FACILITIES MODIFICATION (decorations, more furniture): _____

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>May 21st</u>	<u>Sunday</u>	<u>8am-5pm</u>	<u>25</u>	

- 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 _____ *(waiting for corrected one)*
- Does this activity require waiving of any Board policies? Yes _____ No
- Are any games of chance being held? Yes _____ No
- If yes, State Reg. # _____ Local Permit # _____
- CERTIFICATE OF INSURANCE ATTACHED (OR COPY) Yes _____ No _____
- 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 function. The Board's insurance does not apply to groups and their members using the school facilities.
- 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.

Karen Obredzinski Signature of Applicant 4/10/17 Date

Action Taken by Board of Education on: Date _____ Approved _____ Not Approved _____

Superintendent or Designee _____ Date _____

Comments: EM

FRANKLIN TOWNSHIP BOARD OF EDUCATION

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Quakertown, New Jersey 08868

FACILITY USE APPLICATION

Quakertown Fire Company
Name of Organization/Sponsoring Organization
Please Circle One: I II III
Class of Organization (According to Policy)
Paul Cortellesi 72 Whitehall Road Pittstown NJ 08867 347-843-5229
Responsible Party Street Address Town Zip Phone#
Roger Foor P.O. Box 34 Pittstown NJ 08867 908 735-5220
Alternate Responsible Party Street Address Town Zip Phone#

FACILITY REQUESTED:

New APR _____ Baseball Field _____
Old APR _____ Soccer Field _____
Classroom(s) # _____ Softball Field _____
Gymnasium Increase P. Area _____ Solar Field _____

Other Parking lot, Front entrance yard

Weekend Custodian Needed: Yes @ No charge. JM
(\$30 per hour) No

PURPOSE: Memorial Day Observance
ACTIVITIES: Flag Raising - Planting Flowers
EQUIPMENT (in house/supplied): Podium will be needed. 4 chairs (outside)
FACILITIES MODIFICATION (decorations, more furniture): None

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>Monday May 29</u>	<u>Monday</u>	<u>8:00-11:00</u>	<u>100</u>	

- 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? Yes _____ No
- Are any games of chance being held? Yes _____ No
- If yes, State Reg. # _____ Local Permit # _____
- CERTIFICATE OF INSURANCE ATTACHED (OR COPY) Yes No _____
- 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 function. The Board's insurance does not apply to groups and their members using the school facilities.
- 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] _____ Date April 10, 2017

Action Taken by Board of Education on: Date _____ Approved _____ Not Approved _____

Superintendent or Designee _____ Date _____

Comments: JM