

FRANKLIN TOWNSHIP BOARD OF EDUCATION

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

FACILITY USE APPLICATION

FTS / PTA Please Circle One: I II III
 Name of Organization/Sponsoring Organization Class of Organization (According to Policy)
Kim Muller P.O. Box 306, Quakertown, NJ 713-4805
 Responsible Party Street Address Town Zip Phone#
Lynne French 224 Sidney Rd., Pittstown, NJ 730-6899
 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	_____
Feb. 1	Spring Sports Season	Apr-June			
May 1	Summer Use	July-Aug	Other	<u>FTS Theatre Arts/Basement</u>	

PURPOSE: PTA Fundraiser

ACTIVITIES: Family Comedy Show + silent auction. (2-shows 2-auctions same day)

EQUIPMENT (In house/supplied): stage, lighting + sound system, kitchen same day

FACILITIES MODIFICATION (decorations, more furniture): 200 chairs set up theatre style. aisle down middle. Using letters and numbers (already on chairs)

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>Sun. Nov. 15, 2015</u> <u>two shows same day</u>	<u>Sunday</u>	<u>12pm - 6pm</u>	<u>225/each show</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 # _____ To be provided will apply to top
- 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.**

Kim Muller
 Signature of Applicant _____ Date _____

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

Superintendent or Designee _____ Date _____

Comments: _____