

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 Street Address Town Zip Phone#
Responsible Party
Fernanda DoCabo Street Address Town Zip Phone#
Alternate Responsible Party

REQUESTS FOR USE MUST BE RECEIVED BY:
July 1 For School Year Activity Sept-June
July 1 Fall Sports Season Sept-Dec
Nov. 1 Winter Sports Season Jan-Mar
Feb. 1 Spring Sports Season Apr-June
May 1 Summer Use July-Aug

FACILITY REQUESTED:
New APR/Old APR ___ Baseball Field ___
Classroom(s) # ___ Soccer Field ___
Gymnasium ___ Softball Field ___
Other 8 Tables to be set up outside of Main entrance on grass. If bad weather set up inside hallway by old Main entrance that faces Quakertown Road.

PURPOSE: Mothers Day Plant Sale
ACTIVITIES: All homerooms will be scheduled to visit sale + purchase plants as desired.
EQUIPMENT (in house/supplied): _____

FACILITIES MODIFICATION (decorations, more furniture): 8 Tables (6 ft) to be brought outside.

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>May 6, 2016</u>	<u>Friday</u>	<u>8:30AM-3pm</u>	<u>~ 6 parents</u>	<u>all students / teachers</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 # _____
Yes No ___ Provided by FTS office
- 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 1/26/16
Signature of Applicant Date

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

Superintendent or Designee _____ Date _____

Comments: _____

FRANKLIN TOWNSHIP BOARD OF EDUCATION

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

FACILITY USE APPLICATION

Rural Awareness, Inc
 Name of Organization/Sponsoring Organization Please Circle One: I II **III**
 Lora Jones Class of Organization (According to Policy)

Responsible Party Brooks Durbin Street Address _____ Town _____ Zip _____ Phone# _____
 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>One room 1837 schoolhouse on school grounds</u>		

PURPOSE: Open house for community to view interior of old schoolhouse; access to main school building is not required.

ACTIVITIES: Providing access to old schoolhouse and describing structure, history, and interior

EQUIPMENT (in house/supplied): None

FACILITIES MODIFICATION (decorations, more furniture): None

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
May 21, 2016	Saturday	10:00am - 2:00pm	4-6 docents	Cannot estimate # of visitors
May 30, 2016	Monday (Memorial Day)	9:30am - 12:00pm	2-4 docents	Cannot estimate # of visitors

- 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.

Brooks Durbin 1/8/16
 Signature of Applicant Date

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

Superintendent or Designee _____ Date _____

Comments: _____

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

FACILITY USE APPLICATION

Name of Organization/Sponsoring Organization: FIS PTA Please Circle One: I II III
 Class of Organization (According to Policy)

Responsible Party: Gina Edwards Street Address: _____ Town: _____ Zip: _____ Phone#: _____

Alternate Responsible Party: _____ Street Address: _____ Town: _____ Zip: _____ Phone#: _____

REQUESTS FOR USE MUST BE RECEIVED BY:

- July 1 For School Year Activity Sept-June
- July 1 Fall Sports Season Sept-Dec
- Nov. 1 Winter Sports Season Jan-Mar
- Feb. 1 Spring Sports Season Apr-June
- May 1 Summer Use July-Aug

FACILITY REQUESTED:

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

Grassara behind school

PURPOSE: Fun Fair

ACTIVITIES: Bouncy, Interactives, crafts, games, Food

EQUIPMENT (in house/supplied): garbage pails, tables, chairs, extension cords

FACILITIES MODIFICATION (decorations, more furniture): Outside Only

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>June 10, 2016</u>	<u>Friday</u>	<u>8:00am - 3:00pm</u>	<u>FIS Student Faculty</u>	<u>-</u>
<u>June 13, 2016</u>	<u>Monday</u>	<u>8:00am - 3:00pm</u>	<u>"</u>	<u>"</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 X No _____
- Does this activity require waiving of any Board policies? Yes _____ No X
- Are any games of chance being held? Yes _____ No X
- If yes, State Reg. # _____ Local Permit # _____
- CERTIFICATE OF INSURANCE ATTACHED (OR COPY) Yes _____ No X *on file*
- 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 of Applicant: Gina Edwards Date: 2/13/16

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

Superintendent or Designee _____ Date _____

Comments: _____