

FRANKLIN TOWNSHIP BOARD OF EDUCATION

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

FACILITY USE APPLICATION

United NJ AAU

Please Circle One: I ~~II~~ ~~III~~  
Class of Organization (According to Policy)

Name of Organization/Sponsoring Organization

Megan Haughey

Responsible Party Street Address Town Zip Phone#

Katie Terhune

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 <u>X</u>	Softball Field
Feb. 1	Spring Sports Season	Apr-June		
May 1	Summer Use	July-Aug	Other	

PURPOSE: Basketball practices

ACTIVITIES: basketball

EQUIPMENT (In house/supplied): none

FACILITIES MODIFICATION (decorations, more furniture):

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<del>Thurs</del> Thurs nights	9/6 - 11/2	6:30 - 9:30	40	5
Tues nights	9/6, 9/11, 11/2	6:30 - 9:30	40	5

- 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 X 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 of Applicant \_\_\_\_\_ Date 8/1/16

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: Jacqueline Bradley  
Street Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_

Alternate Responsible Party: Reka Huebscher  
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: Library

PURPOSE: PTA Meetings

ACTIVITIES: Meetings

EQUIPMENT (In house/supplied): Tables and Chairs

FACILITIES MODIFICATION (decorations, more furniture): none

First Thursday of each month for the 2016-2017 School Year

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>9/1, 10/6, 11/3, 12/1, 1/5</u>		<u>7:15pm to</u>	<u>25 - 30</u>	
<u>2/2, 3/2, 4/6, 5/4, 6/1</u>		<u>8:15pm</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 \_\_\_\_\_ on file
- Franklin Township Board of Education must be named in the user's 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: Jacqueline Bradley Date: 8/4/16

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

Troop 81304

FACILITY USE APPLICATION

Girl Scout Heart of NJ

Please Circle One: I II III  
Class of Organization (According to Policy)

Name of Organization/Sponsoring Organization

Reka Huebscher

Responsible Party Street Address Town Zip Phone#

Katrina Nani

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) # <u>125</u>	Soccer Field
Nov. 1	Winter Sports Season	Jan-Mar	Gymnasium	Softball Field
Feb. 1	Spring Sports Season	Apr-June	old APR or art room	
May 1	Summer Use	July-Aug	Other or library (if weather is nice we will be outside on playground)	

PURPOSE: Girl Scout meetings

ACTIVITIES: Snack, craft, play, read,

EQUIPMENT (In house/supplied): table & chairs

FACILITIES MODIFICATION (decorations, more furniture): none

1st Thursday of each month

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
9/1, 10/6, 11/3, 12/1, 1/5		3:30 - 4:30	10-15 kids	4-5 parent helpers
2/2, 3/2, 4/6, 5/4, 6/1				

- 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  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.

Reka Huebscher

8/4/16

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

Cub Scout Pack 108

FACILITY USE APPLICATION

Washington Crossing Council BSA

Please Circle One: I (II) III  
Class of Organization (According to Policy)

Name of Organization/Sponsoring Organization

Responsible Party: Deka Huebscher

Street Address Town Zip Phone#

Alternate Responsible Party: Hiz Turek

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 \_\_\_\_\_
- Classroom(s) # 125 Soccer Field \_\_\_\_\_
- Gymnasium \_\_\_\_\_ Softball Field \_\_\_\_\_
- Old APR or Art room
- Other or library if weather is nice we are going to be outside on the playground

PURPOSE: Cub Scout meeting

ACTIVITIES: snack, craft, games, play

EQUIPMENT (In house/supplied): table and chairs

FACILITIES MODIFICATION (decorations, more furniture): none

4th Thursday of each month for 2016-2017 school year

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>9/29, 10/27, 12/29, 1/26</u>		<u>3:30-4:30</u>	<u>10-15 kids</u>	<u>4-5 parent helpers</u>
<u>2/23, 3/23, 4/27, 5/25</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 \_\_\_\_\_
- 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 \_\_\_\_\_ 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.
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Signature of Applicant: Deka Huebscher

Date: 8/4/16

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

FTS  
PTA BOOK FAIR COMM.

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

Allison Witkowski  
Responsible Party Street Address Town Zip Phone#

Marybeth Forbes  
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 \_\_\_\_\_
- Classroom(s) # \_\_\_\_\_ Soccer Field \_\_\_\_\_
- Gymnasium \_\_\_\_\_ Softball Field \_\_\_\_\_

Other: Theater - no stage

PURPOSE: Scholastic Book Fair

ACTIVITIES: Book Fair - Family Night

EQUIPMENT (in house/supplied): 6 tables

FACILITIES MODIFICATION (decorations, more furniture): ∅

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
9/23 → 9/30/16	Fr, M-F	8 <sup>30</sup> -3 <sup>30</sup>	1 grade @ a time	4 vol per grade
9/28/16	Wed	6 <sup>00</sup> -8 <sup>30</sup>	→ Family Night	

- 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  Will provide 2016-2017 policy once renewed.
- If yes, State Reg. # N/A 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 of Applicant: [Signature] Date: 7/11/2016

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**

FTS PTA MS WINTER WOODLAND DANCE Please Circle One: (I) II III  
Name of Organization/Sponsoring Organization Class of Organization (According to Policy)

FERNANDA DOCABO  
Responsible Party Street Address Town Zip Phone#

LYNNE FRENCH  
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	<u>New APR</u> /Old APR <input checked="" type="checkbox"/>	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>HALLWAY TO NEW APR</u>		

**PURPOSE:** BUILDING CONFIDENCE & GAINING EXPERIENCE AT SOCIAL EVENTS/RECREATION.

**ACTIVITIES:** DANCING AND REFRESHMENTS - ANNUAL EVENT - GRADES 6-8

**EQUIPMENT (in house/supplied):** DJ SOUND BOARD, SPEAKERS; BASE ENT. DJS

**FACILITIES MODIFICATION (decorations, more furniture):** WE'LL USE CAF. TABLES; NEED: DJTABLE; DECOR/REFRESHMENTS WILL BE WOODLAND THEMED/APRES SKI LODGE

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
Jan. 20, 2017	FRIDAY	4pm-10:45pm (Setup 4-7; dance 7:30-9:30pm)(clean up)	75	2 DJS

- 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) ON FILE 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 of Applicant: Lynne French Date: 7/25/16 Thank you!

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**

FTS PTA PK-5 SNOWFLAKE BALL

Please Circle One: (I) II III  
Class of Organization (According to Policy)

Name of Organization/Sponsoring Organization

Jackie Bradley

Responsible Party Street Address Town Zip Phone#

Lynne French

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 hallway linking the two

PURPOSE: Family Recreation; PK-5 Learning to dance

ACTIVITIES: 10TH ANNUAL SNOWFLAKE BALL FAMILY DANCE AND TRICKY TRAY

EQUIPMENT (in house/supplied): DJ SPEAKERS/LIGHTS/SOUND BOARD/PHOTO BOOTH IN GYM

FACILITIES MODIFICATION (decorations, more furniture): TABLE FOR DJ, LADDERS, 4 HALLWAY TABLES, 80 CHAIRS IN GYM; ROLLING CARTS; CAF TABLES FOR TRICKY TRAY PRIZES,

Date(s) Requested	Day(s) of Week	Hours	# Participants	# Others
<u>Jan. 27, 2017</u>	<u>Friday</u>	<u>3:30 - 10:30</u>	<u>200</u>	<u>2 DJs</u>
<u>(Set up 3:30-6:00) (dance 6:30-8:30) (tricky tray 8:30-9:30) (clean up)</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 (TRICKY TRAY)
- If yes, State Reg. # ON FILE Local Permit # ON FILE
- CERTIFICATE OF INSURANCE ATTACHED (OR COPY) ON FILE 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 of Applicant Lynne French

Date 7-25-16 Thank you!

Action Taken by Board of Education on: Date \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

Superintendent or Designee \_\_\_\_\_ Date \_\_\_\_\_

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