

EAST AMWELL TOWNSHIP SCHOOL
Ringoes, NJ 08551

70
(Revised 11/06)

Complete form and return to Superintendent.

Date Filed: _____

APPLICATION FOR USE OF SCHOOL FACILITIES

1. Name of Organization _____
2. Address of Organization _____
3. Applicant's Name _____ Telephone # _____
4. Nature of Program/Activity _____
5. School Facilities Requested (*Please check*)

Auditorium _____	Room(s) _____
Kitchen _____	Grounds _____
Gymnasium _____	Other _____
Library _____	Special Setup _____
6. Date Facilities Requested (Month/Day/Year) _____
7. Beginning Time of Program/Activity _____ Ending Time _____
(Applicant running the program/activity is requested to arrive no earlier than 20 minutes prior to the beginning time noted above.)
8. a) Anticipated Number of People in Attendance _____
b) Audience Composition: General _____ Adult _____ Students/Grades _____

I/We have read the rules adopted by the East Amwell School District Board of Education for the use of the school building, and agree to abide by them.

NOTE: In the event of an emergency, an Automatic External Defibrillator Unit (AED) is located in the hallway outside the Gym in a wall-mounted cabinet. (Open door using handle to gain access.)

As a condition for the use of the premises of the East Amwell School, the undersigned expressly agrees to indemnify and save the Board of Education of East Amwell Township harmless from and against all demands, liabilities, suits or judgments of whatever kind or nature, and all costs or expenses in connection therewith including court costs, attorney's fees arising out of or resulting from death or injury to persons or loss, damage or injury to property caused or occasioned or claimed to be caused or occasioned directly or indirectly by or in connection with the use of the premises by the applicant.

Applicant's Signature _____ Date _____

NOTE: - Except in emergencies, completed applications must be received at least by the first Monday of the month prior to the function to receive attention at the regular Board of Education meeting.

(PERMISSION IS HEREBY GRANTED) (PERMISSION IS HEREBY DENIED) TO THE APPLICANT AS STATED ABOVE FOR THE USE OF THE SCHOOL AND ITS FACILITIES AS REQUESTED IN THE APPLICATION.

Estimated cost to the Applicant, if any: _____

SUPERINTENDENT'S SIGNATURE _____ **Date** _____
(For the East Amwell Twp. Board of Education)

See attached **BOARD POLICY on Building Use.**

cc: Applicant, Supervisor Buildings/Grounds, School Business Administrator, Facilities Use File