

ROXBURY TOWNSHIP SCHOOLS
Application and Agreement for Use of Public School Facilities

All applications must be submitted to the Business Office at least one month prior to requested use.

Date _____

1. Name of Organization _____

2. Contact Person (Person representing organization listed above).

Name: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: _____ Email _____

3. Name of School/Field _____

Auditorium _____ Gymnasium _____ Cafeteria _____ Classroom* _____

Dressing Rooms _____ Aux. Gymnasium _____ Kitchen* _____ Media Ctr * _____

Ticket Booth _____ Locker Rooms _____ Athletic Fields _____

*Requires additional application form Food Will Be Served: yes no

4. Purpose for which facilities are requested _____

5. Date(s) of Use (Include 30 minute set-up and 1 hour breakdown time, if needed)

No. of People
Attending

Day of Week	Date	Time	No. of People Attending
_____	_____	From _____ To _____	_____
_____	_____	From _____ To _____	_____
_____	_____	From _____ To _____	_____

6. School equipment requested: (Please indicate quantity where specified)

District approved personnel operators, additional fees apply *

Wired Mics	<input type="text"/>	Lighting/Sound*	<input type="text"/>	Lapel Mic	<input type="text"/>	Music Stands	<input type="text"/>
Screen	<input type="text"/>	Choral Risers	<input type="text"/>	Tables	<input type="text"/>		<input type="text"/>
Projector	<input type="text"/>	Podium	<input type="text"/>	Folding chairs	<input type="text"/>		<input type="text"/>
Computer Audio	<input type="text"/>	Wireless Mic	<input type="text"/>	Piano	<input type="text"/>		<input type="text"/>

7. Will admission be charged? Yes No
 If yes, for what purposes will funds be used?

8. Any requested changes or modification to this application and agreement for the use of facilities must be made in writing by the organization and approved by the Roxbury Township School District at least three (3) days in advance of the date scheduled for the use of facilities.

This is an application only. Please complete and return original to the Business Office via email: ybauder@roxbury.org.

A permit for use of school facilities will be issued following approval from the Business Administrator. No reservation is confirmed nor application valid until the organization/individual has received this contract signed by the Roxbury Township School District Business Office.

If the Organization submitting this application is a "youth sports team organization," as defined by N.J.S.A. 18A:40-41.5(b), the Organization shall provide the Roxbury Township School District with a statement of compliance with the Organization's Policy No. 2431.4 "Sports Related Concussion and Head Injury" for the management of concussions and other head injuries. As defined in N.J.S.A. 18A:40-41.5(b) a "youth sports team organization" means one or more sports teams organized pursuant to a nonprofit or similar charter or which are member teams in a league organized by or affiliated with a county or municipal recreation department.

If the Organization is a "sports" organization, they shall provide the Roxbury Township School District with a copy of their Blanket Accident Policy or an equivalent insurance certificate guaranteeing \$50,000 accident coverage for participants.

Name of Organization

School

Date of Event

Pursuant to N.J.S.A. 18A:40-41a and N.J.S.A. 2A62A-27, the Roxbury Township School District, its employees, agents and servants shall not be liable for the injury or death of a person arising from the presence of and access to an AED, as well as the action or inaction of the Organization or any of the Organization's members, agents, contractors, servants, employees, volunteers, licensees or invitees.

I have read the rules and regulations of the Roxbury Township School District and hereby agree to abide by and enforce them. I further agree to indemnify and save the Roxbury Township School District harmless from any and all losses and expenses arising out of personal injury, including death or damage to property and including legal fees arising out of the above activity.

The Roxbury Township School District shall be provided with a Certificate of Insurance naming it as additional insured on our General Liability Policy and coverage will respond on a primary basis.

Signature of Sponsor

Date

Approved by: _____ Estimated Custodial Hours Required: _____
(School Administrator) (Date)

CENTRAL OFFICE USE ONLY

Personnel Required: _____
Security Required: _____ Fire Permit Required: _____ Health Permit Required: _____ Insurance Certificate Filed: _____

Approved by: _____ Date: _____ Estimate No.: _____
School Business Administrator or Assistant Business Administrator