PITTSGROVE TOWNSHIP
FACILITY USE REQUEST FORM

989 Centerton Road
Pittsgrove, NJ 08318
856-358-2300

Date of Application *(Must be at least 45 days prior to event)*:	Application # _____

APPLICANT INFORMATION

Name of Organization or Group:		Type of Organization or Group:	
Name of Applicant:	Phone:	Email Address:	
Street Address:	City:	State:	Zip:
Responsible Person **DAY OF EVENT**:	Contact Phone Number **DAY OF EVENT** *(Must be available at this number during entire event)*:		

FACILITY INFORMATION

Date of Event:

Alternate Date:

Time Requested:

- ☐ 8am-Noon
- ☐ Noon-4:00pm
- ☐ 4:00pm-8:00pm
- ☐ Other _____

Check Facility Requested:

- ☐ Deer Pen Park
- ☐ Green Branch Park
- ☐ Unity Park
- ☐ Municipal Building
- ☐ Senior Center
- ☐ Other (Please list below):

_____

_____

Check Amenities Requested:

- ☐ Pavilion
- ☐ Concession Stand
- ☐ Restrooms
- ☐ Fields (Soccer/Baseball/Football)
  - How Many? _____
  - Which Field(s) _____
- ☐ Other _____
- ☐ Tent Rental
- ☐ Meeting Room

Description of Event or Activity:

Number of Participants/Guests:	Will Participants/Guests be Charged a Fee? ☐Yes ☐ No	If so, how much?	What will the proceeds be used for?:

INSURANCE INFORMATION AND HOLD HARMLESS AGREEMENT

Certificate of Insurance

The Township of Pittsgrove carries insurance covering its own legal liability. The Township of Pittsgrove assumes no liability on behalf of or as the result of any act or omission whether intentional, negligent or otherwise, by any licensee or user or its invitees, members, or representatives, or for any damage injury or claim arising from the use of facilities by operation of this application. The Township of Pittsgrove requires that the user complete the Hold Harmless Agreement on the application and file the Certificate of Insurance, expressly name the Township of Pittsgrove as an additional insured, and carrying a minimum amount of insurance coverage for personal injury of one million dollars ($1,000,000.00) and for property damage of five hundred thousand dollars ($500,000.00). Presentation of documentation of such insurance is a condition of use, and must be submitted at the time of application.

_____Initial

Hold Harmless Agreement and Acknowledgement

To the fullest extent permitted by law, the undersigned on behalf of the applicant and with the authority to bind the applicant, agrees to defend, pay on behalf of, indemnify, and hold harmless the Township of Pittsgrove, its elected and appointed officials, its agents, employees, and volunteers and others working on behalf of the Township of Pittsgrove against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the Township of Pittsgrove, its elected and appointed officials, its agents, employees, volunteers, or others working on behalf of the Township of Pittsgrove, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arise out of or is in any way connected or associated with this applicant.

_____Initial

Signature of Applicant and Responsible Representative of Applicant

By signing this Application, the undersigned, with the authority to do so, requests the use of facilities as specified above, and agrees and intends to be bound by, and to comply with, all rules and regulations set forth in this application, by the Township of Pittsgrove, and in any applicable state laws and regulations. The undersigned understands and acknowledges that violation or ignorance of any such rules by this organization/user vests the Township of Pittsgrove with the authority to discontinue all use, to remove the user from the premises, and to deny any future use.

_____
Printed Name & Position of Applicant

_____
Signature of Applicant

TO BE COMPLETED BY TOWNSHIP REPRESENTATIVE

Received from Applicant:	☐ Copy of Valid Driver's License	☐ Certificate of Insurance	☐ Deposit $_____ Check #_____	
Approvals:	RAC Committee: Date _____ ☐ Yes ☐ No	Township Committee: Date: _____	☐ Yes Approval Letter Sent Date: _____	☐ No Denial Letter Sent Date: _____

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