

HANOVER TOWNSHIP BOARD OF EDUCATION
61 Highland Avenue
Whippany, New Jersey 07981

(973) 515-2414

Fax # (973) 515-2477

APPLICATION FOR USE OF SCHOOL FACILITIES
Applications must be submitted 15 working days prior to date of use

Name of Organization: _____
(Print or type)

Address: _____

Name of Sponsor: _____
(Hanover Township Resident)

Address: _____
(Street) (Town) (Zip)

Telephone #: _____ Cell #: _____
(Work/Home) (Work/Home)

Names of Adult Supervisors (one for each group of twenty children):

Facility Requested: _____ School

Cafeteria: _____ Gymnasium: _____ Art Room: _____

Scott R. Pepper Theater (MJS): _____ Viking Gym (MJS): _____

Purpose for which facilities are requested: _____

Approximate number of Participants expected: _____

Have you contracted with any individual or company to participate in your activity? _____Yes _____No

If Yes, Name: _____

Evidence of insurance for individual/company must be submitted to this office before approval of application.

Date(s) of use (Include all rehearsals, if any):

<u>From</u>	<u>Date(s)</u>	<u>To</u>	<u>Day(s) of Week</u>	<u>From</u>	<u>Hours</u>	<u>To</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Additional services or school equipment requested: _____

Unless exempt, (see enclosed) a \$50.00 Application Fee is payable upon submission of application.

Custodial overtime fee for the 2018/2019 school year for Hanover Township Organizations & Recreation Department is \$42.00 per hour. For outside groups, overtime rate is \$47.00 per hour.

I have read the attached rules and regulations of the Board of Education and hereby agree to abide by and enforce them. I further agree to be responsible for any damages arising from the use of these facilities.

Signature of Sponsor: _____

Date of Submission: _____

Print Name: _____

Representing Organization: _____

Permit for Use of School Facilities

Subject to submission of insurance certificate and payment of applicable fee,
permission is hereby granted for the use of facilities as outlined on the previous page.

Building Principal's Signature

Date

Business Administrator's Signature

Date

Make checks payable to:

Hanover Township Board of Education
61 Highland Avenue
Whippany, New Jersey 07981

Remit to:

Office of the Supervisor of Buildings & Grounds
61 Highland Avenue
Whippany, NJ 07981

*** NOTE ***

Charges will be levied unless we are notified 24 hours in advance of a cancellation.

For cancellations, please call: (973) 515-2414

For Internal Office Use Only

Checked and recorded: _____

Application Fee Received: _____

Insurance Certificate received: _____

Custodial Charge: _____

Rental Fee: _____

Total Charges: \$ _____