

# WINSLOW TOWNSHIP BOARD OF EDUCATION

40 Cooper Folly Road, Atco, NJ 08004  
(856) 767-2850 Fax (856) 719-8730  
**USE OF FACILITIES APPLICATION**

The application for facilities must be typed. Once the application is completed, it must be submitted to the building principal for approval. After approval from the principal, the completed application including all paper work must be submitted to the Business Office for final approval. **The application will not be considered without all required information. The application can be typed on line, printed, signed and submitted to the appropriate persons.**

## Required information:

- Business certificate from the New Jersey Business Entity Information submitted with the application, and a signed notarized statement attesting to non-profit status, and in good standing.
- Insurance Certificate- Insurance coverage must be for the duration of the facility use.
- A calendar of practices, competitions and tournaments must be submitted with the application.
- Fire permit
- Police coverage verification
- Documentation of Megan's Law registration submitted to Winslow Township Police Department
- List of staff participants' criminal background check
- Application fee – (non-transferable)- up to \$250.00

## FACILITY USE:

- An applicant will be limited to three (3) Use of Facility Applications per year. **You are only permitted use of the high school gymnasium or the middle school gymnasium. You will not be granted both.**
- Each facility use is limited to four (4) days per week, including tournament.
- Applications must be renewed each year
- Applications must be submitted to the building principal at least 45 days prior to the event.
- Application requests will be awarded based upon availability.
- The applicant agrees to all district safety requirements.
- The applicant is responsible for the behavior and actions of the person(s) using the facilities including any cost of damages incurred. Children must be supervised by a member of the organization at all times.
- Facility must be vacated by 6:00 pm or 9:30 pm depending on days used. Failure to comply with this requirement will result in a \$50.00 fine and possible loss of facility use.
- Use of facility is strictly limited to the area(s) approved. Violation of the approval agreement may result in immediate loss of facility use.
- A two (2) day cancellation notice is required.

## FEES (Fees subject to change):

- Application Fee- up to \$250.00
- Custodial – 1 ½ times the hourly rate per custodian per hour including 1 hours before and 2 hours after the events. Fee subject to change yearly.
- Technician - \$50.00 per hour per technician fee is required for use of technologies.
- District Security Monitor - \$30.00 per hour per security monitor fee is required for use of the auditorium, and for crowds of 75 or more.
- Class A Fees – Profit and Non-profit organizations whose purpose is to benefit their own organization or interest, whether a fee is charged or not.

Area	Per 4 Hour Session Cost	Additional Hourly Cost
Auditorium	\$200.00	\$50.00
Cafeteria	\$200.00	\$50.00
Gymnasium	\$300.00	\$75.00
Athletic Fields	\$300.00	\$75.00
Tennis Courts	\$100.00	\$25.00
Parking Lot	\$100.00	\$25.00
Additional fee for weekend use: ½ session cost.		

- Class B Fees – For the following established Township Youth Athletic organizations, non-profit, and non-commercial organizations whose basic purpose is to benefit the residents of the community, there is a one time per group charge of \$25.00 per year for facility use as long as an admission fee is not charged and if the funds are not used to subsidize the outside group.

Area	Weekend Flat Rate
Auditorium	\$100.00
Cafeteria	\$100.00
Gymnasium	\$150.00
Athletic Fields	\$150.00
Tennis Courts	\$50.00
Parking Lot	500.00

**INSURANCE:** The insurance certificate must have Winslow Twp. Board of Ed. named as “Additional Insured” or the certificate will not be accepted. In addition to valid proof of liability insurance naming the Winslow Township Board of Education as an additional insured under the policy issued to the approved facility user, any organization intending to sell food or beverages, shall also supply proof of a rider or provide some other proof of insurance coverage from its insurance carrier that any and all accidents or occurrences stemming from the sale of food and beverages are appropriately covered through the issued policy of insurance.

**FIRE PERMIT:** You must obtain a fire permit for each facility from the Winslow Twp. Fire Marshal’s Office, 9 Cedar Brook Rd., Sicklerville, N.J. 08081. The telephone number is (609) 561-4225.

**POLICE COVERAGE:** Police coverage is required when there are seventy-five (75) or more persons in attendance at an event. You must obtain, pay and submit proof of police security one week prior to an event, or the event will be cancelled. Please contact the Winslow Township Police Department at: (609) 567-3500.

**Custodial Services:** A \$25.00 per hour per custodian fee is required for the use of facilities on the weekends. This fee is accessed 1hour before the event and 2 hours after the event. The number of custodians required will be contingent on the number of anticipated participants and attendees.

**FOOD SERVICES:** Arrangement for kitchen facilities must be made with the Winslow Township Food Services Department at (856) 767-2850. Food is not permitted in the auditorium.

**Technical Support:** A District technician or designee is required to operate district technologies. This includes computer, screen, projector, lighting, musical/sound equipment and operation of stage curtains. The cost is \$50.00 per hour per technician. Compensation will be for the entire time requested. A cancellation must be made two (2) days in advance of the event.

**Security Monitor:** A district security monitor is required for use of the auditorium, and to monitor the hallway. The cost for a monitor is \$35.00 per hour.

The Board reserves the right to establish availability of district facilities, and to prohibit, rescind or change the use of its facilities, without notice.

I have read and agree to the above requirements for submitting an application for use of facilities.

Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Organization: \_\_\_\_\_

## WINSLOW TOWNSHIP BOARD OF EDUCATION

### USE OF SCHOOL FACILITIES BY OUTSIDE ORGANIZATIONS

#### INDEMNIFICATION AND INSURANCE PROVISIONS

The Lessee shall assume all risk of and responsibility for, and agrees to indemnify, defend, and save harmless The Winslow Township Board of Education and its employees from and against any and all claims, demands, suits, actions recoveries, judgments, costs, and expenses in connection therewith due to the loss of life, property, or injury or damage to the person, body or property, of any person or persons whatsoever, which shall arise from or result directly or indirectly from the use of District premises under this contract. This indemnification obligation is not limited by, but is in addition to the insurance obligations contained in this agreement.

The Lessee shall secure and maintain in force, for the term of the contract, liability insurance as provided herein. The Lessee shall provide the BOE with current certificate of insurance for all coverage's and renewals thereof which must contain the provision that the insurance provided in the certificate shall not be canceled for any reason except after thirty days written notice to the Winslow Township Board of Education.

1. Comprehensive General Liability policy as broad as the standard coverage or currently in use in the State of New Jersey which shall not be circumscribed by any endorsements limiting the breadth of coverage. The policy shall include an endorsement (broad form) for the contractual liability.

**The Winslow Township Board of Education shall be listed as an additionally named insured and Certificate holder.**

**Limits of Liability – coverage required is a minimum of \$1,000,000.**

2. (If Lessee is using owned or leased vehicles as part of its activities) Comprehensive Automobile Liability covering owned, non-owned, and hired vehicles with minimum limits of \$1,000,000 per occurrence for bodily injury liability and property damage;
3. (If Lessee is using own or hired employees as part of its activities) Workers' Compensation insurance applicable to laws of the State of New Jersey and Employers Liability insurance with a limit of not less than \$1,000,000.

Deliver to: Tyra McCoy-Boyle, Business Administrator/Board Secretary  
Winslow Township Board of Education  
40 Cooper Folly Road  
Atco, NJ 08004

**Failure to deliver the required Certificate(s) of Insurance and Hold Harmless/Indemnity Agreement shall prohibit use of any school facility.**

Winslow Township Board of Education  
**APPLICATION FOR USE OF SCHOOL FACILITIES**  
**(One application per facility)**

Date: \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Location Requested:** \_\_\_\_\_ **Date(s) Requested:** \_\_\_\_\_

**Days Requested:** M  T  W  Thurs.  Fri.  Sat.  Sun.

No more than 4 days per week allowed, including tournaments.

**Time requested:**

Practice Start Time:		End Time:		Competitions/Tournaments: Start Time:		End Time:	
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(Facility use must be completed by 9:30 p.m. Monday – Saturday, and by 6:00 p.m. on Sunday)

**Facility Use:**  Practices     Competitions/ Tournaments    **Admission Charge:** \$  per person

**A list of dates for competitions/ tournaments and the anticipated number of people in attendance must be provided. The sponsor must be present until the activity is concluded.**

**Request:**

- |  |  |                                    |   |
|--|--|------------------------------------|---|
| <input type="checkbox"/> CAFETERIA             | <input type="checkbox"/> Auditorium        | <input type="checkbox"/> GYMNASIUM | <input type="checkbox"/> FIELDS/GROUNDS |
| <input type="checkbox"/> Public Address System | <input type="checkbox"/> Sound System      | <input type="checkbox"/> Bleachers | <input type="checkbox"/> Lavatories     |
| <input type="checkbox"/> Kitchen               | <input type="checkbox"/> Lectern           |                                    |   |
| <input type="checkbox"/> Lectern               | <input type="checkbox"/> Stage Lighting    |                                    |   |
| <input type="checkbox"/> Tables                | <input type="checkbox"/> Projector/ Screen |                                    |   |
| <input type="checkbox"/> Chairs                |  |                                    |   |

**Sponsor:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Alternate Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

The sponsor, by signature affirms that he/she will: Abide by the Rules and Regulations pertaining to the use and/or rental of said facilities, and is in agreement with the Indemnifications and Insurance Provisions, and agrees to be responsible for paying the Winslow Township School District any billable fees as per Board Regulation #7510.

**Approval:**

**Principal:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Athletic Director:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**B.A. /B.S.:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Board of Ed.**

**Date:** \_\_\_\_\_

## INDEMNITY AGREEMENT

This agreement is made this \_\_\_\_\_ by and between  
(Date)

\_\_\_\_\_ having its offices and place of business at

(Name of Lessee)

(Lessee Address)

(hereinafter referred to as "Occupant") and the

Winslow Township Board of Education, 40 Coopers Folly Road, Atco, New Jersey (hereinafter referred to as Board of Education").

In consideration of the mutual covenants contained herein and other valuable considerations. It is agreed by and between the parties as follows:

1. **Use of Occupancy.** Board of Education agrees to permit Occupant to use and occupy Board of Education's premises located at \_\_\_\_\_ Room: \_\_\_\_\_  
(School Name)  
Township of Winslow, Camden County, New Jersey, on \_\_\_\_\_  
for the purposes of rental of facilities, on condition that Occup: (Date) \_\_\_\_\_ of Education harmless from any loss, damage, or liability that Board of Education may suffer arising out of or in any way connected with the Occupant's use and occupancy of the Board of Education facilities set forth above.
  
2. **Indemnification.** Occupant shall defend, indemnify, protect, save, and hold harmless the Board of Education, its officers, agents, and employees from any and all liability, claims, fines, suits, losses, demands, actions, damages, and costs of any kind and nature, arising or claimed to arise through any fault, failure, negligence, or responsibility of the Occupant, its agents, officers, employees, invitees or guests, in connection with Occupant's use and occupancy of the Board of Education's facilities set forth above, including, but not limited to, the cost of investigation, court costs, reasonable counsel fees, settlements, judgments, or otherwise.

Signature of responsible officer for organization: \_\_\_\_\_

Megan's Law  
Community Group Registration Form

**N.J.S.A. 2C:7-1, et seq.**, commonly known as "Megan's Law", entitles community organizations with supervisory control over children and victims' groups to information concerning the release of known sexual offenders who meet certain criteria.

Pursuant to the law, organizations must register with the local law enforcement agency. Organizations and groups to be included on the notification list are to be limited to those groups, agencies and organizations that own or operate an establishment where children gather under their care or where women are cared for. The Camden County Prosecutor's Office shall then determine which organizations meet these requirements.

Please fill out the form below and return it to the appropriate police agency. If the Prosecutor's Office determines that your organization or agency qualifies under the law, you will be notified of the release and whereabouts of certain sex offenders.

Date of Registration:	Name of Group:
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Physical Location(s) / Address Where Group Meets:

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**Person(s) to receive Notification.**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**For Athletic Associations:**

Location(s) of facility Used:


Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

**Age of Children Participating:** \_\_\_\_\_

**Objective of Organization:** \_\_\_\_\_  
\_\_\_\_\_

**TO POLICE DEPARTMENT:**

This form must be forwarded to the **Camden County Prosecutor's Office, Attention MEGAN'S LAW UNIT, 25 NORTH FIRTH STREET, CAMDEN, NEW JERSEY 08102. Proof that the form has been submitted must be provided to the district with the application.**

## Staff Participants and Criminal Background Check

The following person(s) will be using the school facility on the night(s) designated on this application and have **completed a criminal background check.**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Address: \_\_\_\_\_  
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