

**REQUEST FOR USE OF MANALAPAN TOWNSHIP RECREATION
FACILITIES & EQUIPMENT**

PLEASE FILL OUT COMPLETELY (PRINT OR TYPE) DATE _____

FACILITY/EQUIPMENT REQUESTED _____

DATES REQUESTED: 1ST CHOICE _____ TIME: _____

2ND CHOICE _____ TIME: _____

SPONSORING ORGANIZATION _____

NUMBER OF PARTICIPANTS EXPECTED: _____ AGE LEVEL: YOUTH ___ ADULT ___

NUMBER OF PARTICIPANTS: MANALAPAN RESIDENTS _____ NON-RESIDENTS _____

FOR WHAT PURPOSE IS FACILITY/EQUIPMENT REQUESTED _____

SUPPLIES REQUESTED _____

NAME OF APPLICANT _____

HOME ADDRESS _____

HOME PHONE # _____ BUSINESS PHONE # _____

EMAIL ADDRESS _____

IDENTIFY ADDITIONAL CONTACT PERSONS:

NAME _____ NAME _____

ADDRESS _____ ADDRESS _____

PHONE # _____ PHONE # _____

RETURN COMPLETED APPLICATION TO: MANALAPAN PARKS & RECREATION
120 RT 522 & TAYLOR MILLS ROAD
MANALAPAN, NJ. 07726

THE APPLICANT AND/OR REPRESENTATIVE OF THE ORGANIZATION LISTED ABOVE CERTIFIES THAT HE/SHE AND THE ORGANIZATION HAS RECEIVED AND READ THE ACCOMPANYING RENTAL RULES AND REGULATION AGREEMENT POLICY 1140 OF THE TOWNSHIP OF MANALAPAN AND AGREES TO COMPLY WITH ALL THE RULES GOVERNING USE OF FACILITIES/EQUIPMENT AND WILL BE RESPONSIBLE FOR ANY DAMAGES THAT MAY OCCUR TO THE FACILITIES/EQUIPMENT DURING THE TIME THEY ARE BEING USED BY THE APPLICANT AND ORGANIZATION. THEY FURTHER AGREE TO REIMBURSE EXPENSES FOR CLEANING OR REPAIRS LEVIED AGAINST THEM DUE TO THEIR USAGE WITHIN TEN (10) DAYS OF WRITTEN DEMAND. THE APPLICANT FURTHER ACKNOWLEDGES THEIR OBLIGATION AND CERTIFIES THE FACT THAT ALL VOLUNTEER COACHES, OFFICIALS, ETC, ASSOCIATED WITH THE PROGRAM ARE SAFETY TRAINED AS PER MANALAPAN TOWNSHIP POLICY 5170 (ATTACHED). ALLOW TEN (10) WORKING DAYS FOR PROCESSING APPLICATION.

DATE

SIGNATURE OF APPLICANT

(Signature also required on bottom of P.3)

OFFICE USE ONLY:

Reviewed by: _____ Approved _____ Disapproved _____ Fee _____

Received: Cert. of Insurance _____ Signed Rules & Regs _____

Revised: October 5, 1993 September 23, 1996 January 28, 2002