DEPARTMENT OF PARK AND RECREATION
APPLICATION FOR RECREATION FACILITIES

Circle Park Requested: Renlund Park New Street Park S. Delsea Drive Park Owens

Todays Date:_____Requested Date:_____Requested Time:_____to_____

Name of Organization:_____

Contact Person:_____Phone:_____

Address:_____Email address:_____

Nature of Function:_____

Facility Requested_____

(Pavilion, baseball, soccer, football field, hockey rink)

Certificate of Insurance: If organized group you must have a Certificate of Liability Insurance (must be attached to application.) The Borough of Glassboro and the Glassboro Park and Recreation Department must be listed as an additional certificate holder (box at lower left hand corner)

Certificate attached? yes_____ no_____.

FEE SCHEDULE FOR USE OF PARK AND RECREATION FACILITIES

1. Use of Athletic Field Lights – Glassboro Residents $37.50 per hour x _____ hours = _____
   Non Resident $75.00 per hour x _____hours = _____
2. Use of Pavilion – 4 hours Glassboro Residents $25.00
   All day Glassboro Residents $50.00
   4 hours Non Resident $50.00
   All day Non Resident $100.00

Total Amt. Due $_____

Application is hereby made to the Glassboro Park and Recreation Commission for the use of the facility described. It is hereby understood and agreed that the applicant will assume responsibility for payment of any required charges. Also, the user is responsible for the preservation of order and for liability for any damage to or loss of any property or equipment that may result from the use of the facility/park. The user also agree to familiarize themselves with all Borough of Glassboro Ordinances (Ch. 351 Glassboro Code) including, but not limited to Code of Conduct (#02-12), No animals or pets allowed in Parks, No Smoking and No Alcohol, also, all State and Federal rules and regulations It is further understood that if the application is granted, the undersigned user will assume full responsibility for liability and insurance coverage and hold The Borough of Glassboro, The Park and Recreation Commission and all of its employees harmless in the event of an accident or injuries resulting from the activity and/or function. It is further agreed that if the undersigned has any questions concerning Borough Ordinances it is their responsibility to ask for copies of the Ordinances so they may be reviewed and terms and conditions may be may be met.*

Signature of Applicant_____

Office Use:
Signed Approval_____Date_____

Special Needs/Services Notes:_____

GLASSBORO PARK AND RECREATION
1 South Main St
Glassboro, NJ 08028
Phone: 856-881-1515 Fax: 856-881-3975
Located In The South Delsea Drive Park