



Green Township School District

Box 14, Greendell, New Jersey 07839

www.greenhills.org

Phone, 973-300-3800

Fax, 973-383-0594

Dr. Jennifer Cenatiempo
Superintendent

Mrs. Karen Constantino
Business Administrator/Board Secretary

Mr. Jon Paul Bollette
Principal

2025-2026 Facility Use Application

To: All Applicants for Building Request

Please be advised that we are maintaining a locked building throughout the day and evening hours for the safety and security of all students, staff, and visitors. In order to accommodate this provision, we will require a point of contact that will arrive first from your organization to allow all other individuals entry into the building.

The point of contact person will be provided with access to the building via a custodian. The entry point for gym usage will be the corner stairs with the Gymnasium Entrance sign. All other entry points will be locked unless otherwise opened by a custodian. The point of contact must remain at the assigned entry door or establish a designee to be the door monitor should the need arise to let in additional people throughout the event. In this way, the exterior doors will always remain in the locked position with the building secured. Propping the door open will not be permitted at any time. Should an organization be found to violate this procedure, the facility use may be revoked.

- Attached is the application and information needed for requesting the use of facilities at the Green Hills School. If you have any questions regarding the request for use of facilities please do not hesitate to contact the Main Office or Business Office.
- Please complete the information requested on pages 2, 3, & 4 of the application and sign where indicated on page 3 and page 4.
- Board Policy and Regulation 7510 is attached for your information and should be kept for future reference.
- The application should be submitted as soon as possible to ensure appropriate Board of Education approval. Start dates cannot be guaranteed if application is submitted less than 1 month prior to the event.
- The organization must have a current certificate of insurance attached to the application when submitted naming the Board as an additional insured. Applications will not be submitted for approval and dates/rooms will not be scheduled until insurance form is provided.
- **MINIMUM INSURANCE REQUIREMENTS:**

Prior to the event date the Applicant/Organization at its own expense, shall procure, carry, and maintain General Liability Insurance from an insurer acceptable to the **Green Township Board of Education**. All insurers shall have at least an A- (Excellent) rating by A.M. Best and be qualified to do business in the State of New Jersey. In no event shall the limits of General Liability Insurance be less than the following:



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Each Occurrence	\$1,000,000
Personal Injury and Advertising Injury	\$1,000,000
Products/Completed Operations Aggregate	\$2,000,000
General Aggregate	\$2,000,000
Medical Expense – Each Person	\$ 5,000
Fire Damage Liability	\$ 300,000

- The Applicant/Organization is required to name **Green Township Board of Education**, as an Additional Insured on the Applicant/Organization’s General Liability policy. The required Additional Insured coverage shall be provided on a Primary and Non-Contributory basis.
- The Applicant/Organization shall provide to **Green Township Board of Education, 69 Mackerley Road, Greendell, NJ 07839** prior to the event date an original ACORD Certificate of Insurance that meets or exceeds the above noted minimum insurance requirements.
- Although all requests will be treated on a first come, first serve basis, school sponsored activities will take precedence over ALL other requests. The assignment of spaces will be accommodated to the best of our ability with final usage of space at the discretion of the superintendent.

We look forward to working closely with our community and various organizations this year!



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25/26 APPLICATION PERMIT FOR USE OF BUILDING / GROUNDS

Name of Organization		
Address of Organization		
Telephone Number		
Contact Name/Position		
Application for Use of	Please "X" Room Requested	Fees Per Room
	Main Gymnasium	
	Small Gymnasium/Cafeteria	
	Library Media Center	
	Music Room	
	Classroom	
	Other	
Date/Time of Requested Use		
Reason for Requested Use		
Anticipated Attendance		
Equipment Needed		
Fee for Use of Space		
Total Fee (If any) Charged for use of Facility		
Insurance Information Name/Address/Phone Number of Insurance Carrier		
(ORGANIZATION MUST PROVIDE A COPY OF INSURANCE CERTIFICATE)		



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WAIVER OF CLAIM 2025-2026

To Whom It May Concern:

Be it known by these present that a mutual agreement exists between the

Green Township Board of Education and _____
(Name of Organization)

that said Board of Education, collectively and individually, its agents, volunteers and employees are not to beheld liable for, or responsible for, any personal injury, including bodily injury or death and/or property damage incurredby, or resulting directly or indirectly from our use of the facility and/or participation as a spectator, or anyone engaged in competitive activities, while in attendance at, or while using the school building, grounds, facilities and equipment.

_____ further agrees to defend, indemnify and save

(Name of Organization)

harmless the said Green Township Board of Education, collectively and individually, its agents, volunteers and employees from any and all manner of actions, cause and causes of action, damages, judgments, claims and demands arising out of or in any manner connected with personal injury, including bodily injury or death or property damage including loss of use thereofresulting directly or indirectly from, or arising out of ouruse of the said building, equipment, facilities, and school grounds under the contract above mentioned.

The Waiver of claim includes the use of any equipment, building, or part of a building, facilities, and services, and school ground, which is owned or leased by the Green Township Board of Education, and which is being used on a rental, concession contract, or gratis basis by

(Name of Organization)

Organization Representative Printed Name/Title	
Organization Representative Signature/Date	
Superintendent / Business Administrator Signature/Date	



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It is hereby agreed and understood that if the Board of Education grants permission for the organization to use the aforementioned facility, that the undersigned representative and organization will assume responsibility for preservation of order at the facility requested as well as responsibility for any damage and /or loss of property. It is further understood that the organization has received, read, and understands their responsibility under the copy of Board Policy and Regulation 7510 attached to this application. The policy regarding smoking in the building and on school grounds and possession and/or consumption of alcoholic beverages on property must be observed.

Signature of Organization Representative	
Date Signed	
Representative Address	
Representative Contact Number	

.....
District Use Only

Date Received from Organization	
Received by	
Room Assigned	
Equipment Requested	
Custodial coverage required	
Superintendent Approval/Date	
Date of Response to Organization	
Response to Organization Made by	