

BUILDING USE 2011

P.O. Box B 630 Route 9 Bayville, NJ 08721
Berkeley Township Parks, Beaches & Recreation

Date: _____ Recreation Center _____ Nature Study _____

Guidelines:

1. Request Forms must be received a minimum of 10 days prior to desired date.
2. Groups using the Recreation Building Must be a Berkeley Resident.
3. Hours available are 8:30am to 4:00pm & 6:00pm to 10:00pm.
4. A Minimum of 10 people is needed to book the Recreation Center.
5. Please keep the building Clean, every group is responsible for their own Clean Up!
6. Supervision of individuals participating in your meetings, and or activities is your Responsibility.
7. No Alcoholic Beverages Permitted.
8. No Smoking Permitted.
9. Building Use Permit must be submitted prior to approval.
10. Notification of Cancellation must be at least 1 week prior to meeting.
11. The Recreation Building will be closed on All Township Holidays.
12. Groups must bring their own supplies such as pens, tape dispensers, scissors etc.
13. The recreation center will close at 10 pm sharp! **PLEASE Initial** _____

Name of Group: _____

Person in Charge: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Group Size: _____

Name of 2nd in Charge: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Cell phone # or work # _____

Dates Desired: _____ Time Desired: _____

(Please list all dates that will be needed)

Applicants Signature: _____ Phone#: _____

Insurance: Homeowners: _____ Certificate: _____

Date Received Application: _____

Approved By: _____ Date: _____

**ALL OF THE INFORMATION ABOVE MUST BE FILLED OUT
IN ORDER TO BE APPROVED**