

Booked On \_\_\_\_\_

**UNION TOWNSHIP BOARD OF EDUCATION**

149 Perryville Road, Hampton, New Jersey 08827

908-735-5511 (t) / 908-730-7591 (f)

\_\_\_APPROVED

\_\_\_DENIED

**APPLICATION FOR USE OF SCHOOL FACILITIES**

*(Application must be received at least 2 weeks prior to activity)*

**THIS IS AN:**     IN-SCHOOL ACTIVITY,  OUTSIDE ORGANIZATION, OR  NON-PROFIT ORGANIZATION.

Name of Organization \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: Home / Work: \_\_\_\_\_ Cell: \_\_\_\_\_

DATE(S) REQUESTED: \_\_\_\_\_

Activity Description: \_\_\_\_\_ # People Attending: \_\_\_\_\_

Time of Activity \_\_\_\_\_ AM \_\_\_\_\_ PM    TO \_\_\_\_\_ AM \_\_\_\_\_ PM    Time you need Facility \_\_\_\_\_ AM \_\_\_\_\_ PM    TO \_\_\_\_\_ AM \_\_\_\_\_ PM

**REQUEST THE USE OF LOCATION/ROOM:**     ELEMENTARY SCHOOL     MIDDLE SCHOOL

(Check all that apply)

\_\_\_ GYM    \_\_\_ STAGE    \_\_\_ CLASSROOM(S) \_\_\_\_\_

\_\_\_ CAFETERIA    \_\_\_ LIBRARY    \_\_\_ OUTDOOR FACILITY (specify) \_\_\_\_\_

**REQUEST THE USE OF EQUIPMENT:** If equipment is not requested on application, there is no guarantee that it can be obtained on the day/night of event. (Check all that apply)

\_\_\_ Chair(s)Qty: \_\_\_    \_\_\_ Table(s)Qty: \_\_\_    \_\_\_ Projector    \_\_\_ Presentation Screen

\_\_\_ Trash Can(s) Qty: \_\_\_    \_\_\_ Sound System    \_\_\_ Podium    \_\_\_ Other (please list) \_\_\_\_\_

**NOTES:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

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

Business Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

**CC:**    \_\_\_ Applicant    \_\_\_ Custodial    \_\_\_ Classroom Teacher    \_\_\_ Library  
         \_\_\_ Physical Ed    \_\_\_ Technology

**ABSOLUTELY NO SMOKING ON SCHOOL PROPERTY**

**UNION TOWNSHIP BOARD OF EDUCATION**  
**APPLICATION FOR USE OF SCHOOL FACILITIES**

**Usage fees will be as follows:**

**Weekends:** All classes (I – III) will be required to pay \$50 per hour for each custodian needed.

**Class I:** Organizations or groups whose membership is composed of Union Township School employees, students and/or parents, such as PTA, Boy Scouts, Girl Scouts and Education Foundation. One time school year fee of \$50. Class I organization’s costs will be capped at \$4,000 annually. Attendance roster to be attached to application.

**Class II:** Organizations or groups who are registered as “not for profit” (501C3). Classrooms - \$50 per classroom, per year. Cafeteria - \$50 per year (no kitchen privileges). Proof of “not for profit” must be sent

**Class III:** All other organizations or groups. Classrooms - \$50 per classroom, per use with a 3 hour maximum. \$25 per hour after maximum exceeded. Cafeteria - \$100 per use with a 3 hour maximum. \$50 per hour after maximum exceeded (no kitchen privileges).

**Gym:** All classes (1 – III) will be required to pay a facility fee of \$10 per hour.

**Please send completed application to Union Township Board of Education, 149 Perryville Road, Hampton, NJ 08827, Attn: Business Office**

- The Supervisor of Facilities will determine and assign the necessary personnel to insure proper security and custodial coverage. Organizations are responsible for any charges incurred. **Saturdays are OVERTIME** and will be charged accordingly.
- **A certificate of Commercial General Liability Insurance (Min. coverage - \$1,500,000 liability insurance, personal injury and equipment insurance) is required. The group must name the Union Township School District as an additional insured party.**

<b><u>FOR OFFICE USE ONLY</u></b>			
CERTIFICATE OF INSURANCE REQUIRED:	NO	<input type="checkbox"/>	
	YES	<input type="checkbox"/>	REC'D <input type="checkbox"/>

- In signing this application, the applicant certifies that the rules and regulations governing the use of school facilities have been received and are fully understood and accepted (**see attached policy**). The user further agrees to indemnify and save harmless the Union Township School District Board of Education from any claim due to personal injury or property damage suffered or incurred in connection with or arising from the activities of the applicant. In addition, the applicant shall be responsible for any penalties levied due to fire, health, or safety code violations resulting from the activity and/or the participants.
- In signing this application, the applicant certifies that the participants of the organization have read, understand and will adhere to the Concussion Policy and Regulation No. 2431.4 (**see attached policy**), as it pertains to youth sports team organizations.
- A facilities fee may be incurred if you do not cancel your event. The cancellation must be a written confirmation.
- For every new school year, applications are accepted on a “first-come, first-served” basis as of July 1<sup>st</sup>.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

## POLICY 7510 USE OF SCHOOL FACILITIES

The Union Township Board of Education will permit community use of the district's facilities only when such use does not interfere with the regular educational program.

Usage priority will follow the following guidelines:

1. School functions and/or school use.
2. Class I and youth organizations directly related to the school.
3. Resident organizations within the community.
4. All other approved organizations based upon original date of application.

Before use of the facilities begins, permission must be obtained by filling out the proper request form and having it approved by the Superintendent.

Usage fees will be as follows:

Weekends: All classes will be required to pay \$50 per hour for each custodian needed.

Class I: Organizations or groups whose membership is composed of Union Township School employees, students and/or parents; such as the PTA, Boy Scouts, Girl Scouts and Education Foundation.  
One time school year fee of \$50.  
Class I organization's costs will be capped at \$4,000 annually.

Class II: Organizations or groups who are registered as "not for profit (501C3)."  
Classrooms - \$50 per classroom per year.  
Cafeteria - \$50 per year (no kitchen privileges).

Class III: All other organizations or groups.  
Classrooms – \$50 per classroom per use with a 3 hour maximum. \$25 per hour after maximum exceeded.  
Cafeteria - \$100 per use with a 3 hour maximum. \$50 per hour after maximum exceeded (no kitchen privileges).

Gym: All classes will be required to pay a facility fee of \$10 per hour.

In addition, the user must provide the school district a certificate of insurance for \$1,500,000.00 in general liability, personal injury and equipment insurance. The group must name the Union Township School District as an additional insured party.

Adopted: 1 March 2005

Revised: 24 October 2011

BOE approved: 23 September 2019

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**To Regulation**

**To Statutes:**

18A:40-41.1  
18A:40-41.2  
18A:40-41.3  
18A:40-41.4  
18A:40-41.5

**To Codes:**

**To Digest**



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## District Policy

### 2431.4- CONCUSSION TESTING AND RETURN-TO-PLAY

Section: Program  
Date Created: October, 2011  
Date Edited: December, 2011

A concussion is a traumatic brain injury caused by a direct or indirect blow to the head or body. In order to ensure the safety of pupils that participate in interscholastic athletics, it is imperative that student-athletes, coaches, and parents are educated about the nature and treatment of sports-related concussions and other head injuries. Allowing a student-athlete to return to play before recovering from a concussion increases the chance of a more serious brain injury.

Every school district that participates in interscholastic athletics is required to adopt a policy concerning the prevention and treatment of sports-related concussions and other head injuries among student-athletes in accordance with the provisions of N.J.S.A. 18A:40-41.1 et seq. For the purpose of this Policy, "interscholastic athletics" shall be Kindergarten through twelfth grade school-sponsored athletic programs where teams or individuals compete against teams or individuals from other schools or school districts.

The school district will adopt an Interscholastic Athletic Head Injury Training Program to be completed by the team or school physician, licensed athletic trainer(s) involved in the interscholastic athletic program, all staff members that coach an interscholastic sport, designated school nurses, and other appropriate school district personnel as designated by the Superintendent. This Training Program shall be in accordance with guidance provided by the New Jersey Department of Education and the requirements of N.J.S.A. 18A:40-41.2.

The Principal or designee shall distribute the New Jersey Department of Education Concussion and Head Injury Fact Sheet and Parent/Guardian Acknowledgement Form to every student-athlete who participates in interscholastic sports. The Principal or designee shall obtain a signed acknowledgement of the receipt of the Fact Sheet by the student-athlete's parent and keep on file for future reference.

Prevention of a sports-related concussion and head injuries is an important component of the school district's program. The school district may require pre-season baseline testing of all student-athletes before the student-athlete begins participation

in an interscholastic athletic program.

Any student-athlete who exhibits the signs or symptoms of a sports-related concussion or other head injury during practice or competition shall be immediately removed from play and may not return to play that day. Emergency medical assistance shall be contacted when symptoms get worse, loss of consciousness, direct neck pain associated with the injury, or any other sign the supervising school staff member determines emergency medical attention is needed. If available when the student-athlete is exhibiting signs or symptoms, the student-athlete will be evaluated by the school or team physician. The Principal or designee shall contact the student-athlete's parent and inform the parent of the suspected sports-related concussion or other head injury.

Possible signs of a concussion can be observed by any school staff member or the school or team physician. Any possible symptoms of a concussion can be reported by the student-athlete to: coaches; licensed athletic trainer; school or team physician; school nurse; and/or parent. The Principal or designee shall provide the student-athlete with Board of Education approved suggestions for management/medical checklist to provide to their parent and physician or other licensed healthcare professional trained in the evaluation and management of sports-related concussions and other head injuries.

A student-athlete who participates in interscholastic athletics and who sustains or is suspected of sustaining a concussion or other head injury shall be required to have a medical examination conducted by their physician or licensed health care provider. The student-athlete's physician or licensed health care provider shall be trained in the evaluation and management of concussion to determine the presence or absence of a sports-related concussion or head injury.

The student-athlete's physician or licensed health care provider must provide to the school district a written medical release/clearance for the student-athlete indicating when the student-athlete is able to return to the activity. The medical release/clearance must indicate the student-athlete is asymptomatic at rest and either may return to the interscholastic athletic activity because the injury was not a concussion or other head injury or may begin the district's graduated return to competition and practice protocol outlined in Regulation 2431.4. A medical release/clearance not in compliance with this Policy will not be accepted. The medical release/clearance must be reviewed and approved by the school or team physician.

The school district shall provide a copy of this Policy and

Regulation 2431.4 to all youth sports team organizations that operate on school grounds. In accordance with the provisions of N.J.S.A. 18A:40-41.5, the school district shall not be liable for the injury or death of a person due to the action or inaction of persons employed by, or under contract with, a youth sports team organization that operates on school grounds, if the youth sports team organization provides the school district proof of an insurance policy in the amount of not less than \$50,000 per person, per occurrence insuring the youth sports team organization against liability for any bodily injury suffered by a person and a statement of compliance with the school district's Policy and Regulation 2431.4 - Prevention and Treatment of Sports-Related Concussions and Head Injuries.

For the purposes of this Policy a "youth sports team organization" means one or more sports teams organized pursuant to a nonprofit or similar charter or which are member teams in a league organized by or affiliated with a county or municipal recreation department.

This Policy and Regulation shall be reviewed and approved by the school physician and shall be reviewed annually, and updated as necessary, to ensure it reflects the most current information available on the prevention, risk, and treatment of sports-related concussion and other head injuries.

N.J.S.A. 18A:40-41.1; 18A:40-41.2; 18A:40-41.3; 18A:40-41.4; 18A:40-41.5

Adopted: 22 November 2010

Revised: 24 October 2011