

## Bogota Recreation

162 West Main Street, Bogota, NJ 07603

### Facility Use Application

#### **Applicant Information:**

Full Name: \_\_\_\_\_

Organization/Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### **Field Location (Check all that apply):**

\_\_\_\_\_ Baseball Field 1      \_\_\_\_\_ Softball Field 1      \_\_\_\_\_ Little League Field 1

\_\_\_\_\_ Pavilion      \_\_\_\_\_ Stage      \_\_\_\_\_ Little League Field 2

\_\_\_\_\_ (Other)

Purpose of Use: \_\_\_\_\_

Dates of Use: From \_\_\_\_\_ to \_\_\_\_\_

Hours of Use: From \_\_\_\_\_ to \_\_\_\_\_

Number of Participants: \_\_\_\_\_

Non-Profit, if so benefitting whom: \_\_\_\_\_

For Profit \* any associations that run for profit, a fee must be paid directly to the Recreation Department

#### **Equipment/Structures to be Used (if any):**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

#### **Additional Information/Requests:**

- \_\_\_\_\_
- \_\_\_\_\_

**Attachments Required:**

- Certificate of Insurance
- Hold Harmless Agreement

**Terms and Conditions:** *I hereby certify that the information provided is accurate and that I agree to comply with all rules, regulations, and guidelines set forth by the field management authority. I understand that failure to adhere to these terms may result in the revocation of this permit.*

*If this application is approved, the \_\_\_\_\_ (name of Organization) will assume responsibility for any damage thereto or loss property that may occur and for the due observance of all rules and regulations of the Borough of Bogota governing use of such areas and/or facilities. As an applicant, I realize that all and any related charges that may be incurred through use of facilities/areas requested. I understand that approval of this application will be withheld until proof of other authorized permits associated with this use are presented to the Borough of Bogota and assume all responsibility in securing each permit.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**For Official Use Only:**

Application Received Date: \_\_\_\_\_

Insurance Received Date: \_\_\_\_\_

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_

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

Email:

Bogota Recreation: [rec@bogotaonline.org](mailto:rec@bogotaonline.org)