USE OF FACILITIES REQUEST PACKET

The Board of Education will permit the use of school facilities when such permission has been requested in writing and has been approved by the Superintendent. Please note that the Board of Education reserves the right to withdraw permission after it has been granted in the event circumstances change requiring such school facilities or school grounds will be needed for a school district purpose or due to a school closing due to weather or other emergency. The use of school facilities will not be granted for any purpose that is prohibited by law.

Each user shall present evidence of the purchase of organizational liability insurance to the limit as prescribed by district regulations. (See insurance requirements page for specific liability amounts, and other specific requirements.) Use of facilities will be denied if coverage is not sufficient and/or requested information does not appear on the Certificate of Insurance. It will be necessary for groups using our facilities to comply with our established concussion testing and return-to-play policy. A copy of our Policy and Regulation #2431.4 is part of this request packet and should be carefully reviewed. The Statement of Compliance must be returned with this Use of Facilities Request form.

Please note that 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 inactions of persons employed by, or under contract with, a youth sports team organization that uses school facilities or operates on a 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.

Please note that you must be very specific requesting dates and times. If requesting use of facilities for a season, you must attach a separate sheet listing the exact dates and times you are requesting. If your request is not specific, it will be denied for lack of required information.

We ask that this package be submitted at least three (3) months prior to the date of use. This information should be returned, with your current Certificate of Insurance to the Office of the Superintendent.

If approved and you have met the necessary criteria, you will receive a letter of authorization from the Superintendent. This letter will also notify you of your contact person and any other information you may need.

The fee structure for the use of facilities is also attached. Please note the requirement for partial pre-payment of fees. Groups not paying in a timely manner will be denied future use of our facilities.
Fees Structure - Use of the Building and Grounds

Fees required for use of facilities shall be due as follows:

Not later than ten (10) days prior to the approved date of Use of Facilities, a payment of 50% (fifty percent) of the fee shall be paid by the organization requesting such use of facilities.

The balance of the fee shall be paid no later than thirty (30) days following the use of facilities.

All payments shall be drawn payable to the order of the Greater Egg Harbor Regional High School District Board of Education and directed to the attention of the:

   Treasurer
   Greater Egg Harbor Regional H.S. District
   1824 Dr. Dennis Foreman Drive
   Mays Landing, NJ 08330

Questions regarding payment of fees may be directed to the Treasurer at 609-625-1399.
Greater Egg Harbor Regional High School District

FEE STRUCTURE: USE OF THE BUILDINGS AND GROUNDS

<table>
<thead>
<tr>
<th>RENTAL (Per Season)</th>
<th>NEW NON - PROFIT</th>
<th>**NEW FOR - PROFIT</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field, Gymnasium, Track, Tennis Courts (weekday usage only)</td>
<td>$400</td>
<td>$600</td>
<td>Full Season (3 months or less)</td>
</tr>
<tr>
<td></td>
<td>$100</td>
<td>$200</td>
<td>Each add’l month</td>
</tr>
<tr>
<td>Field, Gymnasium, Track, Tennis Courts (weekend* usage only)</td>
<td>$300</td>
<td>$500</td>
<td>4 Weekends or Less</td>
</tr>
<tr>
<td></td>
<td>$100</td>
<td>$200</td>
<td>Each add’l weekend</td>
</tr>
<tr>
<td>Field, Gymnasium, Track, Tennis Courts (combination weekday/weekend* usage)</td>
<td>$600</td>
<td>$800</td>
<td>Full Season (3 months or less)</td>
</tr>
<tr>
<td></td>
<td>$100</td>
<td>$200</td>
<td>Each add’l month</td>
</tr>
<tr>
<td>Field, Gymnasium, Track, Tennis Courts (weekday or weekend*)</td>
<td>$100</td>
<td>$200</td>
<td>Per Day (up to 6 hours)</td>
</tr>
<tr>
<td></td>
<td>$30</td>
<td>$40</td>
<td>Each add’l hour</td>
</tr>
<tr>
<td>Lining of Field</td>
<td>$150</td>
<td>$150</td>
<td>Per Field</td>
</tr>
</tbody>
</table>

Tournaments, Pageants, Recitals**
(Per Event)

<table>
<thead>
<tr>
<th></th>
<th>NEW NON - PROFIT</th>
<th>**NEW FOR - PROFIT</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gymnasium</td>
<td>$600</td>
<td>$1,000</td>
<td>Up to 6 hours</td>
</tr>
<tr>
<td></td>
<td>$100</td>
<td>$200</td>
<td>Each add’l hour</td>
</tr>
<tr>
<td>Auditorium</td>
<td>$700</td>
<td>$1,100</td>
<td>Up to 6 hours</td>
</tr>
<tr>
<td></td>
<td>$100</td>
<td>$200</td>
<td>Each add’l hour</td>
</tr>
<tr>
<td>Cafeteria^</td>
<td>$500</td>
<td>$700</td>
<td>Up to 6 hours</td>
</tr>
<tr>
<td></td>
<td>$50</td>
<td>$100</td>
<td>Each add’l hour</td>
</tr>
<tr>
<td>Combination of 2 of the above</td>
<td>$1,200</td>
<td>$2,400</td>
<td>Up to 6 hours</td>
</tr>
<tr>
<td>Combination of 3 of the above</td>
<td>$1,500</td>
<td>$3,000</td>
<td>Up to 6 hours</td>
</tr>
</tbody>
</table>

Rehearsal, Practice** (NO SPECTATORS)

<table>
<thead>
<tr>
<th></th>
<th>NEW NON - PROFIT</th>
<th>**NEW FOR - PROFIT</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auditorium, Gymnasium, Cafeteria ^</td>
<td>$75/hr</td>
<td>$200/hr</td>
<td>Hourly</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>NEW NON - PROFIT</th>
<th>**NEW FOR - PROFIT</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use of Classroom**</td>
<td>$50</td>
<td>$100</td>
<td>Per Classroom Per Evening</td>
</tr>
</tbody>
</table>

Insurance coverage called for by the Joint Insurance Fund and approval by our Risk Consultant is required.

*Saturday evenings (after 6pm) and Sunday usage requires fee for security personnel at the rate of $40.00 per hour.

**There is an additional fee for custodial/maintenance/security services/technical assistant at the rate of $40.00 per hour per person scheduled, as needed.

^Cafeteria seating area only, appliances and kitchen area not available for use.

Fees can be waived for local recreation and community organizations at the discretion of the Superintendent.

Special use for extended periods of time may be evaluated and a flat rate will be determined.
INSURANCE REQUIREMENTS

A CURRENT CERTIFICATE OF INSURANCE IS TO BE SUBMITTED WITH EVERY USE OF FACILITIES FORM
(Please share this information with your insurance agent)

Applicants must provide a certificate of liability insurance showing the Greater Egg Harbor Regional High School District as the Certificate Holder including the District as an Additional Insured for a limit of $1,000,000.

In addition, the description section of the Certificate should describe briefly the type of event, dates of activity and the specific location where the event is to be held (name of school). For example: “Use of soccer fields at Oakcrest High School from March 1, 2016 through June 30, 2016”.

Other coverage such as Workers Compensation, Accident Insurance for volunteers and/or participants and Excess Umbrella Liability policies should also be shown on the Certificate of Insurance.

The Certificate of Insurance will be reviewed by the District and the Risk Management Consultant (in advance) and must be approved prior to Superintendent authorization to use the field and/or facilities.

Private coverage is to be primary.

NOTE: If deemed necessary by the District Risk Management Consultant, an Indemnity and Hold Harmless Agreement will be required, and we will provide the form if necessary.
POLICY AND REGULATION 2431.4 - PREVENTION AND TREATMENT OF SPORTS-RELATED CONCUSSIONS AND HEAD INJURIES

Please find attached a copy of our Policy and Regulation #2431.4, adopted by the Greater Egg Harbor Regional High School Board of Education. The District will require all organizations and youth groups to provide a statement of compliance with the district’s Policy and Regulation #2431.4.

Please read the attached Policy and Regulation, and complete the Statement of Compliance attached. Sign on the line provided indicating that you have read and will comply with the Greater Egg Harbor Regional High School District’s policy on the prevention and treatment of sports-related concussions and head injuries. This Statement of Compliance is to be returned along with your Request for Use of Facilities form. If this Statement of Compliance is not returned with your Use of Facilities Request Packet, your group will be denied use of our facilities.

If you have any additional questions, please feel free to contact the Office of the Superintendent at 609-625-1456.
A concussion is a traumatic brain injury caused by a direct or indirect blow to the head or body. Allowing a student-athlete to return to play before recovering from a concussion increases the chance of a more serious brain injury that can result in severe disability and/or death. The following procedures shall be followed to implement N.J.S.A. 18A:40-41.1 et seq and Policy 2431.4.

A. Interscholastic Athletic Head Injury Training Program

1. The school district will adopt an Interscholastic Athletic Head Injury Training Program to be completed by the school or team 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.

2. This Training Program shall be in accordance with the guidance provided by the New Jersey Department of Education and the requirements of N.J.S.A. 18A:40-41.1 et seq.

B. Prevention

1. The school district may require pre-season baseline testing of all student-athletes before the student-athlete begins participation in an interscholastic athletic program or activity. The baseline testing program shall be reviewed and approved by the school or team physician trained in the evaluation and management of sports-related concussions and other head injuries.

2. The Principal or designee will review educational information for student-athletes on prevention of concussions.
3. All school staff members, student-athletes and parents of student-athletes shall be informed through the distribution of the New Jersey Department of Education Concussion and Head Injury Fact Sheet and Parent/Guardian Acknowledgement Form and other Communications from the Principal and coaches on the importance of early identification and treatment of concussions to improve recovery.

C. Signs or Symptoms of Concussion or Other Head Injury

1. Possible signs of concussions can be observed by coaches, licensed athletic trainer, school or team physician, school nurse or other school staff members. Possible signs of a concussion may be, but are not limited to, the student-athlete:
   a. Appears dazed, stunned or disoriented;
   b. Forgets plays or demonstrates short-term memory difficulty;
   c. Exhibits difficulties with balance or coordination;
   d. Answers questions slowly or inaccurately; and/or
   e. Loses consciousness.

2. Possible symptoms of concussion shall be reported by the student-athlete to coaches, licensed athletic trainer, school or team physician, school nurse and/or parent. Possible symptoms of a concussion are, but not limited to:
   a. Headache;
   b. Nausea/vomiting;
   c. Balance problems or dizziness;
   d. Double vision or changes in vision;
e. Sensitivity to light or sound/noise;

f. Feeling sluggish or foggy;

g. Difficulty with concentration and short-term memory;

h. Sleep disturbance; or

i. Irritability.

D. Emergency Medical Attention for Concussions or Other Head Injury

1. Any student-athlete who is exhibiting the signs or symptoms of a sports-related concussion or other head injury during practice or competition shall immediately be removed from play and activities and may not return to the practice or competition that day.

2. The school staff member supervising the student-athlete when the student-athlete is exhibiting signs or symptoms of a sports-related concussion or other head injury shall immediately contact emergency medical assistance 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.

   a. In the event the school or team physician is available when the student-athlete is exhibiting signs or symptoms of a sports-related concussion or other head injury, the physician may make the determination to call emergency medical assistance.

3. The school staff member supervising the student-athlete when the student-athlete is exhibiting signs or symptoms of a sports-related concussion or other head injury during practice or competition shall report the occurrence to the Principal or designee. 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.
E. Sustained Concussion or Other Head Injury

1. A student-athlete who participates in interscholastic athletics and who sustains or is suspected of sustaining a concussion or other head injury shall immediately be removed from practice or competition and 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.

2. The student-athlete suspected of sustaining a concussion or other head injury shall be provided a copy of Board of Education Policy and Regulation 2431.4 and a copy of Board of Education approved suggestions for management/medical checklist to provide to their parent and their physician or licensed health care professional.

3. The student-athlete’s physician must provide to the school district, upon the completion of a medical examination, a written medical release/clearance when the student-athlete is able to return to the activity. The release/clearance must indicate:

   a. The medical examination determined the injury was not a concussion or other head injury, the student-athlete is asymptomatic at rest and the student-athlete may return to the interscholastic athletic activity; or

   b. The medical examination determined the injury was a concussion or other head injury, the student-athlete is asymptomatic at rest and can begin the graduated return to competition and practice protocol outlined in F below.

A medical release/clearance not in compliance with this requirement will not be accepted. The student-athlete may not return to the activity or begin the graduated return to competition and
practice protocol until he/she receives a medical evaluation and provides a medical clearance/release that has been reviewed and approved by the school or team physician.

4. Complete physical, cognitive, emotional and social rest is advised while the student-athlete is experiencing symptoms and signs of a sports-related concussion or other head injury. (Minimize mental exertion, limit over-stimulation and multi-tasking, etc.)

F. Graduated Return to Competition and Practice Protocol

1. Upon the school physician’s acceptance of the written medical release/clearance, the student-athlete may begin a graduated return to competition and practice protocol supervised by a licensed athletic trainer, school or team physician or designated school nurse trained in the evaluation and management of concussions and other head injuries. The following steps shall be followed:

Step 1 – Completion of a full day of normal cognitive activities (attendance at school, studying for tests, watching practice, interacting with peers, etc.) without re-emergence of any signs or symptoms. If there is no return of signs or symptoms of a concussion, the student-athlete may advance to Step 2 below on the next day. If a re-emergence of any signs or symptoms of a concussion occur, the student-athlete shall be required to have a re-evaluation by the student-athlete’s physician or licensed healthcare provider. The student-athlete shall not be permitted to begin the graduated return to competition and practice protocol until a medical clearance, as required in E.3. above, is provided and approved by the school or team physician.

Step 2 – Light aerobic exercise, which includes walking, swimming or stationary cycling, keeping the intensity less than 70% maximum percentage heart rate. There shall be no resistance training. The objective of this Step is increased heart rate. If there is no return of any signs or symptoms of a concussion, the student-athlete may advance to Step 3 below
on the next day. If a re-emergence of any signs or symptoms of a concussion occur, the student-athlete shall return to Step 1.

Step 3 – Sport-specific exercise including skating and/or running. There shall be no head impact activities. The objective of this Step is to add movement and continue to increase the student-athlete’s heart rate. If there is no return of any signs or symptoms of a concussion, the student-athlete may advance to Step 4 below on the next day. If a re-emergence of any signs or symptoms of a concussion occur, the student-athlete shall return to Step 2.

Step 4 – Non-contact training drills such as passing drills, agility drills, throwing, catching, etc. The student-athlete may initiate progressive resistance training. If there is no return of any signs or symptoms of a concussion, the student-athlete may advance to Step 5 below on the next day. If a re-emergence of any signs or symptoms of a concussion occur, the student-athlete shall return to Step 3.

Step 5 – The student-athlete’s medical condition, upon completing Step 4 with no return of any signs or symptoms of a concussion, shall be evaluated for medical clearance based upon consultation between the school district’s licensed athletic trainer, school or team physician, designated school nurse and the student-athlete’s physician. After this consultation and upon obtaining written medical release/clearance approved by the school or team physician, the student-athlete may participate in normal training activities. The objective of this Step is to restore the student-athlete’s confidence and for the coaching staff to assess the student-athlete’s functional skills. If there is no return of any signs or symptoms of a concussion, the student-athlete may advance to Step 6 below on the next day. If a re-emergence of any signs or symptoms of a concussion occur or if the student-athlete does not obtain medical release/clearance to proceed to Step 6, the school or team physician, in consultation with the
Student-athlete’s physician, shall determine the student-athlete’s return to competition and practice protocol.

Step 6 – Return to play involving normal exertion or game activity. If the student-athlete exhibits a re-emergence of any concussion signs or symptoms once he/she returns to physical activity, he/she will be removed from further activities and returned to Step 5.

G. Temporary Accommodations for Student-Athletes with Sports-Related Head Injuries

1. Rest is the best “medicine” for healing concussions or other head injuries. The concussed brain is affected in many functional aspects as a result of the injury. Memory, attention span, concentration and speed of processing significantly impact learning. Further, exposing the concussed student-athlete to the stimulating school environment may delay the resolution of symptoms needed for recovery. Accordingly, consideration of the cognitive effects in returning to the classroom is also an important part of the treatment of sports-related concussions and head injuries.

2. Mental exertion increases the symptoms from concussions and affects recovery. To recover, cognitive rest is just as important as physical rest. Reading, studying, computer usage, testing, texting and watching movies if a pupil is sensitive to light/sound, can slow a pupil’s recovery. In accordance with the Centers for Disease Control’s toolkit on managing concussions, the Board of Education may look to address the pupil’s cognitive needs in the following ways. Pupils who return to school after a concussion may need to:

   a. Take rest breaks as needed;

   b. Spend fewer hours at school;

   c. Be given more time to take tests or complete assignments (all courses should be considered);
d. Receive help with schoolwork;

e. Reduce time spent on the computer, reading and writing; and/or

f. Be granted early dismissal from class to avoid crowded hallways.

Adopted: January 2012
The Board of Education adopts this Policy as a measure to protect the safety, health and welfare of pupils participating in school-sponsored interscholastic athletic programs. The Board believes a concussion testing and return-to-play policy for student-athletes suspected of sustaining a concussion will protect the student-athlete from risk of more serious health problems.

A concussion is a brain injury that is caused by a direct or indirect blow or jolt to the head or to the body, or from the head striking an object such as the ground or another person. Some people have obvious symptoms of a concussion, such as passing out, headache, dizziness or double vision, while others do not. With rest, most people fully recover from a concussion; however, on rare occasions concussions can cause more serious health problems. Therefore, the Board requires strict adherence to this Policy in the event a student-athlete sustains a head injury or an injury that could cause a concussion.

If it is suspected a student-athlete sustained an injury that could cause a concussion or if signs observed by others or symptoms reported by the student-athlete are those signs and symptoms of a concussion, the student-athlete will be immediately removed from the activity and the student-athlete will not be allowed to return to practice or play until the pupil receives a medical examination conducted by the pupil’s physician. The pupil’s physician must make a determination on the presence /absence of a concussion.

If the student-athlete is concussed or injured, the physician will appropriately treat the student-athlete and shall be required to provide a medical release, without limitations, indicating when the pupil is able to return to the activity. A student-athlete diagnosed with a concussion shall be required to complete a symptom-free week (seven days) initiated on the first asymptomatic day before initiating the Return-to-Activity Progression outlined in this Policy. The student-athlete shall be monitored during this time period for any reoccurrence of concussion symptoms.

If the physician determines the student-athlete is not concussed or injured, the physician shall be required to provide a medical release, without limitations, with a return-to-play date. Physician clearance notes that are inconsistent with this concussion policy may not be accepted by the district and will be referred to the school physician. All medical examinations conducted by the student-athlete’s physician when the student-athlete is suspected of sustaining a concussion shall be reviewed by the school physician, if necessary.
The Board will require, as part of the required medical examination every pupil wishing to participate in a contact/collision sport or activity, as determined by the Board, an initial computerized, non-invasive, baseline concussion assessment prior to the beginning of a sport of activity. Results of all initial assessments will be reviewed by AtlanticCare and will provide baseline data that could be helpful in the event it is suspected the student-athlete subsequently sustains a concussion. If it is suspected a student-athlete sustained a concussion, he/she will be required to complete a post-injury, computerized, non-invasive concussion assessment to assist in determining the extent of the injury, monitor recovery, and in making safe return-to-play decisions. The results of all post-injury assessments will be reviewed by AtlanticCare. A post-injury assessment may be shared with the student-athlete’s physician with consent of the student-athlete’s parent or guardian. An initial baseline assessment may be applicable for longer than one season or activity period; therefore, a pupil may not be required to complete an initial assessment before beginning to participate in every sport or activity. These computerized assessments will be conducted by AtlanticCare at the student-athlete’s expense.

Student-athletes that have sustained a concussion may return to full game play when he/she meets the following criteria:

1. Medical release with no limitations from the student-athlete’s physician and confirmed by the school physician if necessary;

2. The student-athlete must complete a symptom-free week (seven days) initiated on the first asymptomatic day before initiating the Return-to-Activity Progression outlined below (exceptions to this provision must be approved by the school physician); and

3. Completion of the Return-to-Activity Progression (a. through f. below) which is based on recommendations in the Zurich Consensus Statement from the 3rd International Congress on Concussion in Sport 2009 and is recommended by the New Jersey State Interscholastic Athletic Association:

   a. Step 1 – No activity with complete physical and cognitive rest;
b. Step 2 – Light aerobic exercise which includes walking, swimming or stationary cycling keeping the intensity less than seventy percent maximum percentage heart rate and no resistance training;

c. Step 3 – Functional exercises such as increased running intensity, agility drills and non-contact, sport-specific drills;

d. Step 4 – Non-contact practice activities and training drills involving progression to more complex training drills. Student-athlete may initiate progressive resistance training;

e. Step 5 – Full normal training activities following medical clearance; and

f. Step 6 – Return-to-Play.

Each step outlined above shall be separated by twenty-four hours. If any concussion symptoms occur during the Return-to-Activity Progression, the student-athlete will be required to drop back to the previous step of activity where the student-athlete had no symptoms and try to progress again after twenty-four hours of rest has passed.

Adopted: September 2011

New Jersey Interscholastic Athletic Association Concussion Policy
Zurich Consensus Statement from the 3rd International Congress on Concussion in Sport, 2009
USE OF BUILDING REQUEST AND PLANNING FORM FOR ___________________ SCHOOL

Name of Organization: ___________________________________________ Date: __________________

Non-Profit Organization ___________ For-Profit Organization ___________

Contact Person ___________________________ Phone # __________________________

Mailing Address: __________________________________________________________________________
__________________________________________________________________________________________

Email Address: ____________________________________________________________

Facility is to be used for: ________________________________________________________________

Dates and times facility is to be used (be very specific) ____________________________
________________________________________________________________________________________

Total number of people anticipated: ___________ Admission Charge $____________

Facilities requested (be specific-i.e., classroom, auditorium, cafeteria, soccer field, etc.
(Oakcrest gymnasiums: Gray gym-blue floor OR Blue Gym-wooden floor)
________________________________________________________________________________________

Equipment and furniture needed (number of tables, chairs, desks, large trash cans, etc.)
________________________________________________________________________________________

Special Requirements: (**at an additional cost – see fees structure)

A. Lighting** ____________  B. Public Address System** ____________
C. Sound** ____________  D. Scoreboard** ____________
E. Food** ____________  F. Bleachers ____________
G. Concession Stand ____________  H. Cafeteria ____________
I. Gates needed ____________  J. Custodial Services ** ____________

Additional Request/Requirements: __________________________________________________________

A CURRENT CERTIFICATE OF INSURANCE MUST BE ATTACHED TO THIS APPLICATION
ALONG WITH THE COMPLIANCE STATEMENT FOR OUR CONCUSSION POLICY
1. An application for a permit to use public school buildings must be filed with the Office of the Superintendent at least three (3) months prior to the date for which the building is to be used in order to insure sufficient time for approval.

2. The Board of Education will not permit the use of schools if the purpose or result of such use is personal gain to any individual or individuals, of a political nature, or a private social function.

3. All permits shall be revocable and shall not be considered as a lease, and the Board of Education or its authorized agent may reject any application or cancel any permit.

4. A permit is not transferable.

5. The holder of a permit to use any part of the school buildings or grounds may be required to provide police attendance at each performance to uphold law and order. All policemen so provided shall be either regular policemen of one or more of the constituents who shall be employed only during their non-duty hours, or special policemen appointed by the governing body of the constituent school district.

6. Alcoholic beverages are NOT permitted in or around school facilities or on school grounds.

7. Smoking in any part of the school building or grounds is positively prohibited.

8. A permit does not include the use of Board-owned equipment such as: spotlights, floodlights, moving picture apparatus, public address systems, band instruments, stage scenery, phonographs, grand pianos or the like. Separate arrangements must be made if such items are required. Additional fees will be required.

9. Special permission must be obtained for decorating, installing scenery, moving pianos or the installation of any apparatus. All such material must be flame proof or fire retardant and must be removed from the building promptly after the performance so that there will be no interference with school activities.

10. Whenever any equipment, scenery or apparatus is left after the use of a school building, the holder of the permit will be charged a fee for the removal of same, which will not be delayed for the convenience of the party who used the facility.

11. Custodial service is provided only for heating, lighting and ventilation of the building. This service does not include the erecting or dismantling of scenery, equipment or other apparatus. Custodians are not required to perform tasks or errands for the party using the building, either prior to, during or following a performance. The holder of the permit must furnish all the help necessary to arrange and run the programs such as stagehands, ushers, ticket collectors, etc.

12. The number of tickets sold must not exceed the seating of the facility for which the permit is granted. No standing room will be allowed. Overflows of spectators will be cleared from the building by police and firemen if such a situation should develop.

13. Activities scheduled within school buildings must terminate in sufficient time to permit clearing of the building by 11:00 PM.

14. Should the holder of a permit wish to cancel a reserved date, the Board of Education Business Office must be notified at least by 12:00 noon on the day of the meeting or performance or by 4:00 p.m. the day before for a morning activity. If no notice is received and the holder of the permit fails to appear within one hour after the meeting or performance is scheduled to start, the holder of the permit must pay the regular charge for the extra services of each employee and also the operating cost, if any, for the time the building is kept open.

15. All fees in connection with the rental of the school facilities are payable directly to the Board of Education as required by the fee structure in advance of the date of rental. The Board reserves the right to waive the rental fees in accordance with existing Board of Education policy.

16. All food sales must be approved in advance by the Superintendent. The applicant is solely responsible for any and all liability resulting from the applicant’s sale or distribution of food, candy, beverages, etc.

17. The Board of Education shall provide a Site Manager to be present at specified events. If assigned by the Board of Education, the applicant shall be required to follow the directions of the Site Manager at all times.

I (WE) HEREBY AGREE TO THE ABOVE TERMS AND CONDITIONS FOR UTILIZATION OF THE GREATER EGG HARBOR REGIONAL FACILITIES.

Signature: ___________________________________________ Date: __________________________
STATEMENT OF COMPLIANCE
POLICY AND REGULATION #2431.4

Date ____________________

To: THE GREATER EGG HARBOR REGIONAL HIGH SCHOOL DISTRICT

From: (Name & Address of Organization/Group)

This is to advise that ______________________________ has read Policy
(Name of Organization/Group) and Regulation #2431.4 – Concussion Testing and Return-To-Play AND Prevention and Treatment of Sports-Related Concussions and Head Injuries as provided by the Greater Egg Harbor Regional High School District and agrees to comply with this Policy and Regulation as written.

Signed ______________________
(Agent for organization/group)

RETURN THIS FORM TO THE OFFICE OF THE SUPERINTENDENT ALONG WITH YOUR REQUEST FOR USE OF FACILITIES REQUEST AND RULES AND REGULATIONS FORMS.