



TOWNSHIP OF MILLSTONE
 RECREATION DEPARTMENT
 470 Stagecoach Road, Millstone Twp., NJ 08510
 Phone: 732-917-2954

FACILITY REQUEST FORM

Applicant Information

Name of Organization/Individual			Circle One: Non-Profit For Profit Individual		
Contact Person:		Day Phone:		Evening Phone:	
Current Street Address:					
City:	State:	Zip Code:	Email:		
Purpose for Facility Use:					
Date of Application:			Estimated # of Participants:		
Facility or Park Requested:					
Date(s) Requested:					
Time Frame (Hours) Requested:					

Request for Facilities

Fields Requested:
Building Requested:
Playground Requested:
Bathroom Access:
Other Requests:
and Type of Vehicles:

Additional Information

Will an Admittance Fee be Charged? Circle One YES NO	
Will Food be (Circle One) SOLD SERVED BRING YOUR OWN	
Will an Outside Vendor be Retained? YES NO (Insurance Certificate and Registration needed for all Vendors)	
Vendor Name	Phone #
Vendor Address	

ANY INACCURACIES IN THE COMPLETION OF THIS APPLICATION WILL IMMEDIATELY INVALIDATE ANY APPROVALS UPON DISCOVERY. IF AN EVENT IS ALREADY IN PROGRESS, THE EVENT WILL BE TERMINATED IMMEDIATELY

Applicant Signature:

LIABILITY INSURANCE REQUIREMENT

**A liability insurance policy to contain the following may be required before granting your request:
 Listing "The Township of Millstone" as additionally insured. Listing event/picnic date and location**

Official Use Only

Department:	Director:	
Organization:	Event Date:	Fee Assessed:
Park & Fields assigned:		
Building assigned:		
Bathroom Facilities:		
Comments/Concerns:		