COUNTY OF GLOUCESTER
BUILDINGS & GROUNDS DEPARTMENT

FACILITIES USE
REQUEST TO RESERVE

1. Name of Organization:_____
2. Name(s) of Person Responsible for Event
   a. _____
   b. _____
3. **Certificate** of **Liability** with County of Gloucester 2 South Broad Street Woodbury NJ 08096 listed as other insured for $1,000,000 (copy) to be faxed along with this form to 856-251-6720.
4. Contact Numbers
   a. Office_____
   b. Cell_____
   c. Fax_____
   d. Email_____
5. Facilities Requested_____
6. Purpose for Use of Facility

_____

_____

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7. Date of Event:_____
8. Time of Event**: start**_____AM PM **end**_____AM PM
9. Number of Participants Expected_____
10. List any special considerations:

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*Completion of this form does not guarantee approval of use. Upon receipt of all required information this request will be evaluated you will be contacted with approval or denial of request Your group is responsible for set up and clean up.

THE CONTACT PERSON WILL BE NOTIFIED AFTER REVIEW OF THE REQUEST.
Approval

1._____
Chad M. Bruner , Administrator Date

2._____
Peter Scirrotto,.Sr, Superintendent Buildings & Grounds Date