

Borough of High Bridge Field Reservation Application

Completed applications, with unexpired proof of insurance, must be submitted to Borough Parks and Recreation Committee, c/o Borough Clerk, at least 30 days in advance of the event.

Please attach a Certificate of Insurance showing proof of liability insurance with a limit of at least \$1,000,000 per occurrence naming the Borough of High Bridge as an additional insured with respect to the above-mentioned event.

Alcoholic beverages are prohibited in any public park or facility without the prior application and authorization by the Mayor and Council.

EVENT INFORMATION:

Type of Use: _____

Field(s) requested (please circle): 1 | 2 | 3 | 4 | Commons | Huskies | Other: _____

Requesting Huskies field will be inclusive of fields 1,2, and 3.

Date of Event: _____

Time of Event: _____

Number of persons expected: _____

**ALL DATES REQUESTED
MUST HAVE A START TIME
AND END TIME SPECIFIED.**
Please feel free to attach a document
specifying requested dates/times.

APPLICANT INFORMATION:

Authorized Contact name and/or organization: _____

Address: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Authorized Alternate Contact name: _____

Address: _____

Phone number: _____ Email Address: _____

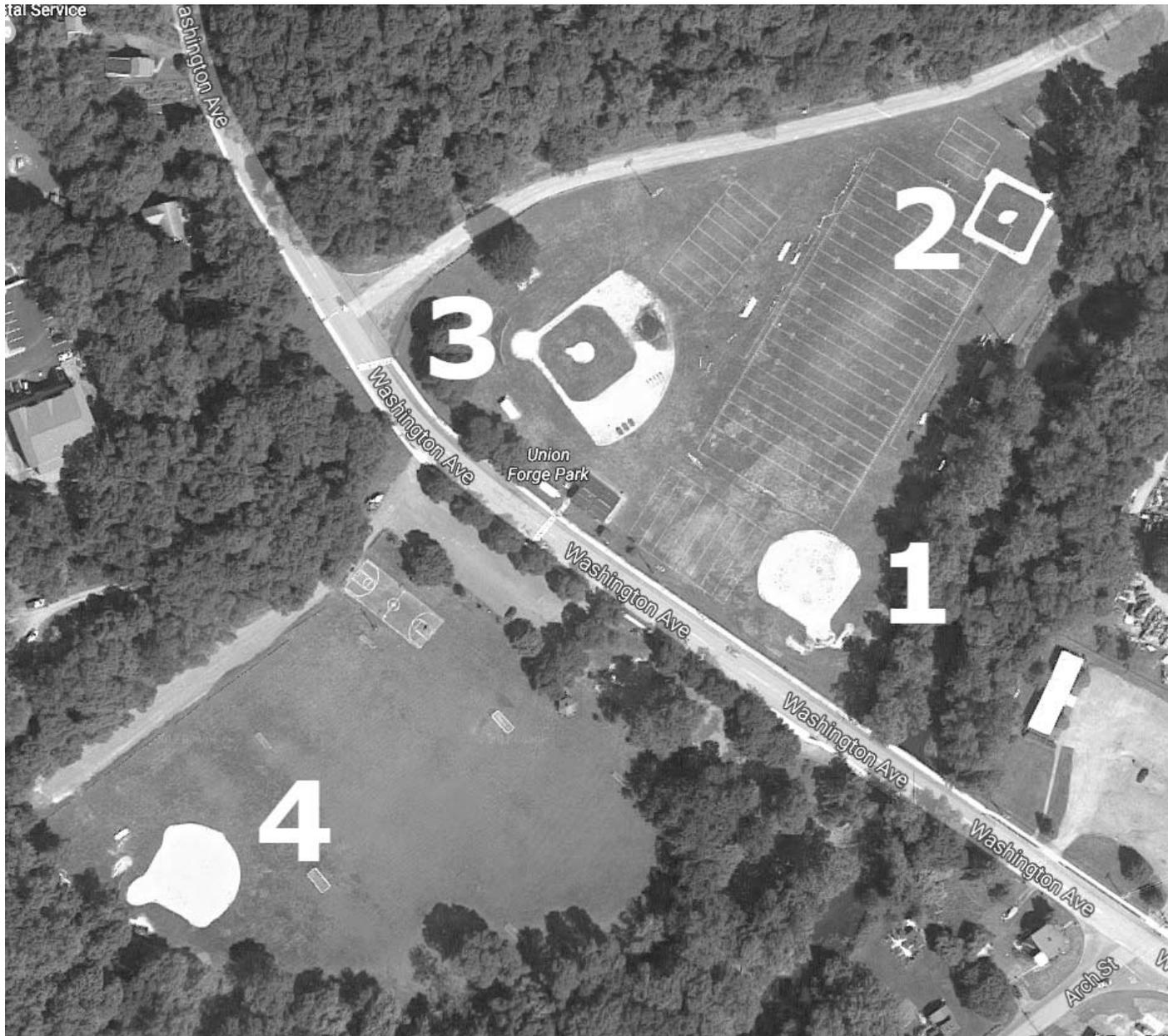
INSURANCE INFORMATION (Fill out or attach):

Insurance Company Name: _____

Insurance Company Address: _____

Phone Number: _____ Fax: _____

Agent / Contact Name: _____



Requesting "Huskies Field" will be inclusive of fields 1,2, and 3

Additional Supporting Information:

Borough of High Bridge Contact Names: (For any questions or concerns)

Name: Administrator, Bonnie Fleming Email: bfleming@highbridge.org

Emergency Services:

All Field Reservation applicants **MUST** make prior contact with the High Bridge Emergency Services and Department of Public Works to provide adequate event information and any additional information that may be required by our Emergency Services.



High Bridge Police Department: Contact Name: Chief Brett Bartman
Phone: 908-638-6500

Comments: _____

Signature of Chief: _____ Date: _____



South Branch Emergency Services: Contact Name: John Silliman
Email: battalion3652@clintonems.org

Comments: _____

Signature of Chief: _____ Date: _____



High Bridge Fire Department: Contact Name: Jeff Smith
Email: jeffreysmith14@msn.com

Comment: _____

Signature of Chief: _____ Date: _____



Department of Public Works: Contact Name: Rick Roll
Email: rroll@highbridge.org

Comment: _____

Signature of Director: _____ Date: _____

I, hereby, agree that all information above is true to the best of my knowledge and understand that the Borough of High Bridge may require additional information on which to base a satisfactory approval.

An event fee may be charged by the Borough of High Bridge for use of any of its recreational open space. All fees MUST be paid to the Borough of High Bridge prior to approval and issuance of the above Field Permit.

Authorized Signature: _____ **Date:** _____

Approval for Field Usage Application – Borough Use Only Below This Line

_____ The above application is approved for use as listed

-OR-

_____ The above application is approved with the following conditions

-OR-

_____ The above application is NOT APPROVED. REASONS for denial:

Authorized Signer

Date