

**Stillwater Township Recreation Commission
Application Permit for the Use of Grounds**

Name of Organization: _____

Address of Organization: _____

Contact Person: _____ Position: _____

Telephone #'s: (H) _____ (W) _____ (C) _____

Email Address: _____

(X) Requested Use:		
Seasonal	*(Schedule of events MUST be attached)*	
Particular Date	Date:	Time:
(X) Specific Area Requested: (circle park)		
Baseball Field/Softball	Stillwater Park in Swartswood	Veteran's Memorial
Soccer Field	Volunteer Field	Veteran's Memorial
Lacrosse / Football		

Pavilion / Date(s) of Requested Use: _____	Times of Requested Use: _____
Reason for Request: <u>SPECIAL REQUESTS</u>	

PLEASE BE ADVISED THAT NO REQUESTS WILL BE APPROVED UNTIL A PROGRAM SCHEDULE IS SUBMITTED

CLEAN UP IS THE RESPONSIBILITY OF USER AND MUST BE COMPLIED WITH. LITTER MUST BE REMOVED FROM THE FIELDS.

Insurance Coverage Requirements

Full Name of Insurance Carrier: _____

All persons attending the planned function or group or team event are required to be covered in an amount not less than \$1,000,000 per occurrence.

Your insurance policy must establish the above listed minimum coverage requirements and show the Township of Stillwater as an additional insured party.

The Township Committee may require "special events" insurance coverage if deemed appropriate.

The Township Committee may waive these insurance coverage requirements for activities sponsored by the Township or for any other activities where deemed appropriate.

A copy of the required general liability and property damage insurance policies must be submitted with this application and prior to any use of facility.

This form must be presented in person at a committee meeting by an authorized member of your organization as follows: Spring Season (March-June) must be at or before the Feb. meeting; Summer Season (July-Aug.) must be at or before the May meeting; Fall Season (Sept.-Nov.) must be at or before the July meeting.

Hold Harmless Agreement

I sign this document on my own behalf or as the designated agent for my organization or my corporation as my voluntary act.

By signing this document, I (and my organization or corporation where applicable) agree to hold harmless the Township of Stillwater, as well as the township's officers, employees, agents and assigns, against any claims, suits or other actions arising from, caused by, or which are the alleged result of any act of a participant, guest, invitee, licensee, visitor or any other person present on the premises listed above in order to organize, assist, supervise, observe, enjoy or participate in any other way in the activity to be held (as described above) on the date(s) listed above.

By signing this document, I (and my organization or corporation where applicable) further agree to indemnify (for all damages and attorney's fees incurred) the Township of Stillwater, as well as the township's officers, employees, agents, of a participant, guest, invitee, licensee, visitor or any other person present on the premises listed above in order to organize, assist, supervise, observe, enjoy or participate in any other way in the activity to be held (as described above) on the date(s) listed above.

Compliance with Rules and Regulations

I have obtained a copy of all rules, regulations and the program waiver for the facility or location requested and, by signing this document, represent that I have reviewed said rules and regulations and I (and my organization or corporation where applicable) agree to abide by those rules and regulations and accept full responsibility for violations thereof.

The undersigned certifies that he or she (on behalf of his or her organization or corporation where applicable) has met all the requirements set forth in this application permit for the use of grounds.

Signature: _____

(sign name here)

(print name here)



FOR OFFICE USE ONLY

Permit: Granted: _____ Denied: _____ Date: _____

Signature of Recreation Director: _____

Exceptions, Special Remarks, Fees: _____



RULES AND REGULATIONS FOR FIELD USE APPLICATION/USE

1. Please be advised that NO requests will be approved over the phone or by email. All applicants must appear in person at a regularly scheduled Recreation Commission meeting according to the following schedules:

Spring Season (March – June) must be at or before the February meeting
Summer Season (July – August) must be at or before the May meeting
Fall Season (September – November) must be at or before the July meeting

RECREATION MEETINGS ARE POSTED ON THE STILLWATER TOWNSHIP WEBSITE AT:
<https://stillwatertownshipnj.com/>

THERE WILL BE NO EXCEPTIONS

2. Please be advised that NO incomplete applications will be approved. All applications must include a program schedule. Only actual scheduled use dates are to be included. No anticipated or rain dates can be pre-scheduled. These will be approved on an availability basis only. Rain dates will only be allowed if no conflict with another previously scheduled organization.
3. No schedule changes will be permitted unless previously approved by the Recreation Commission at a regularly scheduled meeting.
4. There must be at least one (1) Stillwater resident as a member of the playing team.
5. Clean up is the responsibility of the team and all trash is to be removed from the fields. Use of the provided recycle bins is required. Please make sure all litter is cleaned up after use.
6. All park rules and regulations must be followed including NO alcohol use on the fields at any time.
7. Parking is permitted in designated areas ONLY. No parking on the fields.
8. Permission needs to be granted by the Recreation Commission representative for access to the gate for loading and unloading of equipment. There will be a key available at the Town Hall or with the Recreation Commission representative for access. There will be NO keys randomly issued or copied.
9. Compliance with the latest CDC Guidelines for Sports Activities under the current NJ Governor’s Executive Orders **IS REQUIRED.**
10. Park hours are “DAWN TO DUSK”, no evening field use is permitted.

Signature: _____

(sign name here)

(print name here)

2021 ACKNOWLEDGMENT, RELEASE AND WAIVER OF LIABILITY
TOWNSHIP OF STILLWATER

NOTICE AND INSTRUCTIONS FOR COMPLETING THE TOWNSHIP OF STILLWATER'S AND THE TOWNSHIP'S RECREATION COMMISSION'S ACKNOWLEDGMENT AND AGREEMENT FOR ASSUMPTION OF ALL RISKS, AND WAIVING AND RELEASING ALL CLAIMS FOR PERSONAL INJURIES, DEATH AND PROPERTY DAMAGES DUE TO, ARISING OUT OF OR INVOLVING THE ACCIDENTAL EXPOSURE TO SARS-CoV-2, COVID-19, MIS-C & OTHER PANDEMIC ILLNESSES.

CAREFULLY READ THIS DOCUMENT AND THE ATTACHED ACKNOWLEDGEMENT AND AGREEMENT FOR ASSUMPTION OF ALL RISKS, AND WAIVING AND RELEASING ALL CLAIMS FOR PERSONAL INJURIES, DEATH AND PROPERTY DAMAGES DUE TO AN ACCIDENTAL EXPOSURE TO SARS-CoV-2, COVID-19, MIS-C & OTHER PANDEMIC ILLNESSES AT A TOWNSHIP OF STILLWATER RECREATION PROGRAM, USE OF A TOWNSHIP PROPERTY OR FACILITY OR ATTENDING ANY EVENT ON OR AT A TOWNSHIP PROPERTY OR FACILITY (“WAIVER”).

THE ATTACHED WAIVER AFFECTS IMPORTANT LEGAL RIGHTS YOU, YOUR CHILD(REN) AND/OR YOUR OTHER FAMILY MEMBER(S) AND/OR DEPENDENT(S) MAY HAVE IN THE EVENT YOU, YOUR CHILD(REN), AND/OR OTHER FAMILY MEMBER(S)/DEPENDENT(S) BECOME EXPOSED TO, INFECTED WITH, OR SUSTAIN BODILY INJURIES, DEATH AND/OR PROPERTY DAMAGE FROM HIGHLY CONTAGIOUS VIRUS(ES) AND DISEASES.

I. Background and Purpose

The Township of Stillwater and the Township of Stillwater Recreation Commission (hereinafter jointly and separately referred to in the attached WAIVER as the “Township of Stillwater”) offer the use of Township properties and facilities, including recreational fields, for programs that are operated by non-Township of Stillwater recreation providers, leagues..., as well as Township sponsored events and offers to the public the option of participating in or attending a variety of indoor and outdoor physical, social and educational programs and activities, including competitive and non-competitive sports and sporting events, organized leagues, day camps, games, and instructional/training programs and camps, many of which are not organized, operated or run by the Township of Stillwater (collectively referred to hereinafter and in the attached WAIVER as the “RECREATION PROGRAM(S)”). These RECREATION PROGRAM(S) are held on Township of Stillwater property and other public and semi-public places that are accessible to large numbers of people on a daily basis.

Due to the ongoing COVID-19 pandemic, and until further notice, any adult age 18 or older wishing to enroll themselves, their child(ren) or any other dependent(s) family members into a RECREATION PROGRAM, or seeking to otherwise voluntarily participate in a RECREATION PROGRAM operated on or at Township of Stillwater property or facility, as a coach, counselor, instructor, referee, official, or volunteer, is required to complete, **sign and return this WAIVER TO RECREATION SECRETARY by no later than _____, or the enrollment deadline set for the specific RECREATION PROGRAM in which participation/access is sought.**

Enrollment and participation in any RECREATION PROGRAM(S) and permission to access any Township of Stillwater facilities/property and equipment to participate in or use at a RECREATION PROGRAM is expressly conditional on properly completing, signing, and returning this WAIVER in a timely manner.

Access to and participation in any RECREATION PROGRAM(S) and/or Township of Stillwater facilities, property and equipment used in a RECREATION PROGRAM may be denied or revoked at any time for failure to properly complete, sign and return this WAIVER.

II. Acknowledgment of Agreement

ACKNOWLEDGEMENT AND AGREEMENT FOR ASSUMPTION OF ALL RISKS, AND WAIVING AND RELEASING ALL CLAIMS FOR PERSONAL INJURIES, DEATHS AND PROPERTY DAMAGES DUE FROM AN ACCIDENTAL EXPOSURE TO SARS-CoV-2, COVID-19, MIS-C & OTHER PANDEMIC ILLNESSES AT A RECREATION PROGRAM OR EVENT ON OR AT TOWNSHIP OF STILLWATER PROPERTY OR FACILITY.

I/WE, _____ (hereinafter "I/WE), acknowledge and represent that I/WE am/are the parent(s)/legal guardian(s) of:

(hereinafter referred to as the "PROGRAM PARTICIPANT(S)")

By signing this WAIVER and initialing each page, I/WE acknowledge and agree that I/WE have read and fully understand: (i) the Center for Disease Control's ("CDC") and the New Jersey Department of Health's ("NJDOH") information and guidelines for preventing/protecting against, and recognizing the signs and symptoms of, infection for SARS-CoV-2 (the virus that causes COVID-19) and the related illnesses and medical conditions called COVID-19 and Multisystem Inflammatory Syndrome in Children ("MIS-C")(collectively the "PANDEMIC ILLNESSES"); and the Township of Stillwater Recreation Commission "COVID-19 Operational Plan" for 2021.

I/WE further acknowledge, understand and agree that:

1. The CDC and NJDOH have determined that the PANDEMIC ILLNESSES are highly contagious viruses, diseases and medical conditions.
2. Exposure to or infection from these PANDEMIC ILLNESSES may cause serious permanent bodily injury, including respiratory failure, cardiac arrest, and death in healthy persons of all ages.
3. These PANDEMIC ILLNESSES are new. The standards and recommendations on how to prevent and protect against the risk of exposure to infection and the spread of these PANDEMIC ILLNESSES continues to change as more data becomes available.

4. These PANDEMIC ILLNESSES presently exist and remain prevalent throughout all areas of the State of New Jersey and continue to infect persons and spread throughout all counties and local communities, including the residents of the Township of Stillwater.
5. These PANDEMIC ILLNESSES have a high probability of spreading to person(s) who are either in direct contact with, or in close proximity to (within about 6 feet or 2 meters) an infected person.
6. The CDC and NJDOH believe these PANDEMIC ILLNESSES are most likely to spread from person to person by droplets produced into the air when an infected person coughs, sneezes, talks or otherwise moves air out through their nose and mouth; and from touching/contacting surfaces on which droplets containing the virus exist.
7. There is no known vaccination(s), immunization(s) or cure for these PANDEMIC ILLNESSES.
8. The CDC and the NJDOH maintain that the best way to prevent and protect against infection and/or spread of these PANDEMIC ILLNESSES is to self-quarantine and to avoid contact with other individuals, large gatherings and spending time in public places and buildings.
9. TOWNSHIP OF STILLWATER and the TOWNSHIP OF STILLWATER RECREATION COMMISSION (“Township of Stillwater”) in some cases sponsor(s) and in most case makes its recreation facilities available to non-Township owned or controlled organizations that offer to the public the option of participating in or attending a variety of indoor and outdoor physical, social and educational programs and activities, including competitive and non-competitive sports and sporting events, organized leagues, day camps, games, and instructional/training programs and camps (“RECREATION PROGRAM(S)”) which are essential to the social, physical, educational and character development and the mental and physical health of the public.
10. Attending or participating in any RECREATION PROGRAM on or at a Township property or facility poses an inherent risk of infection and a heightened risk of injury from and exposure to these PANDEMIC ILLNESSES regardless of the measures taken by the TOWNSHIP OF STILLWATER: (i) to avoid close contact with other persons, including infected persons; (ii) to disinfect Township of Stillwater facilities, equipment and public property; and (iii) to discover, contact trace, and quarantine infected persons and/or persons exhibiting signs and symptoms of infection of these PANDEMIC ILLNESSES.
11. Attending and/or participating in a RECREATION PROGRAM at a Township owned property or facility may also increase the risk of exposure to these PANDEMIC ILLNESSES and the further spreading of these PANDEMIC ILLNESSES to other family members, PROGRAM PARTICIPANTS, and third persons.

By signing this WAIVER, I/WE do further acknowledge the contagious nature of these PANDEMIC ILLNESSES, and that an inherent and heightened risk of danger to infection and exposure to these PANDEMIC ILLNESSES exists for all PROGRAM PARTICIPANTS, persons and other participants attending any RECREATION PROGRAM on or at Township of Stillwater property or facilities at this time. I/WE acknowledge and agree to voluntarily assume all risks that I/WE, the PROGRAM PARTICIPANT(S), and our other family member(s) may be exposed to or infected by these PANDEMIC ILLNESSES by attending or

participating in any RECREATION PROGRAM at a Township of Stillwater property or facility; and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I/WE understand that the risk of becoming exposed to or infected by these PANDEMIC ILLNESSES at a RECREATION PROGRAM at a Township of Stillwater property or facility may result from the actions, omissions or negligence of myself and others, including, but not limited to the Township of Stillwater's officials, officers, employees, and volunteers; and other participants/attendees of the RECREATION PROGRAM and their families.

I/WE, on behalf of ourselves, the PROGRAM PARTICIPANT(S) and the other dependents of my/our household, I/WE voluntarily agree to assume all of the foregoing risks, and do accept sole and complete responsibility for any and all injuries, damage(s) and other losses to the PROGRAM PARTICIPANT(S), my/our other dependent(s), the other members of my/our family, and/or to myself/ourselves for attending or participating in a RECREATION PROGRAM at a Township of Stillwater property or facility, including for all bodily injuries, disabilities, permanent disabilities, deaths, illnesses, damages, losses, claims, demands, liabilities, medical treatment and expenses, attorney's fees, costs of suit and/or expenses of any kind that is incurred in connection with attending or participating in any RECREATION PROGRAM at a Township of Stillwater property or facility.

I/WE, on behalf of myself/ourselves, the PROGRAM PARTICIPANT(S), my/our other household members and/or dependents, HEREBY RELEASE, COVENANT NOT TO SUE, INDEMNIFY, DISCHARGE, WAIVE AND HOLD HARMLESS THE TOWNSHIP OF STILLWATER, THE TOWNSHIP OF STILLWATER RECREATION COMMISSION, AND EACH OF THE TOWNSHIP OF STILLWATER'S OFFICIALS, GOVERNING BODY MEMBERS, OFFICERS, EMPLOYEES AGENTS, VOLUNTEERS AND REPRESENTATIVES FOR AND FROM ANY AND ALL CLAIMS, DAMAGES, DEMANDS, LOSSES, LIABILITIES, ACTIONS, COSTS AND EXPENSES OF ANY KIND ARISING OUT OF OR IN ANY WAY RELATING TO THE ACCIDENTAL AND/OR NEGLIGENT EXPOSURE TO THESE PANDEMIC ILLNESSES FROM ATTENDING OR PARTICIPATING IN ANY RECREATION PROGRAM(S).

I/WE UNDERSTAND AND AGREE THAT THIS WAIVER AND RELEASE INCLUDES ANY AND ALL CLAIMS BASED ON THE ACTIONS, OMISSIONS, OR NEGLIGENCE OF THE TOWNSHIP OF STILLWATER, THE TOWNSHIP OF STILLWATER RECREATION COMMISSION AND TOWNSHIP OF STILLWATER'S OFFICIALS, GOVERNING BODY MEMBERS, OFFICERS, EMPLOYEES, AGENTS, VOLUNTEERS AND REPRESENTATIVES, REGARDLESS OF WHETHER INFECTION FROM THESE PANDEMIC ILLNESSES OCCUR BEFORE DURING OR AFTER PARTICIPATION AND/OR ATTENDANCE IN ANY RECREATION PROGRAM(S).

By signing this agreement, I/WE further acknowledge that I/WE have read and discussed with the PROGRAM PARTICIPANT(S) the provisions of this WAIVER and the dangers and risks associated with attending and/or participating in any of the RECREATION PROGRAM(S); the PROGRAM PARTICIPANT(S) fully understand(s) and appreciate(s) these dangers and risks; and the PROGRAM PARTICIPANT(S) voluntarily wishes to enroll in, participate and otherwise attend the RECREATION PROGRAM.

This WAIVER does not supersede, circumvent, or cancel Township of Stillwater Recreation Commission's Main Participation Agreement or Rules and Regulations.

If any part of this WAIVER is found by a court of competent jurisdiction to be invalid, the remainder of this WAIVER release from liability shall nevertheless remain in full force and effect and the offending provision or provisions severed here from.

I/WE, have read and accept the terms and conditions of this, and acknowledge and agree that it shall, to the fullest extent allowed by law, be effective upon me, and my respective heirs, personal representatives, and estate.

If Participate is less than 18 years of age:

Signature of Parent(s)/Guardians

Date

If Participate is 18 years of age or older:

Signature of Parent(s)/Guardians

Date

_____ initial