



Harmony Township
908-213-1600
3003 Belvidere Road
Phillipsburg, NJ 08865
www.harmonytwp-nj.gov

REQUEST FOR USE OF PAVILION

All persons or organizations wishing to reserve the pavilion must furnish the following applicable information. A letter or email will be sent indicating approval or disapproval.

Name/Person Responsible: _____

Name of Organization/Group : _____(if applicable)

Address : _____

Phone # : _____ Email : _____

Date Requesting : _____ Time Start/End : _____

Purpose of Use : _____ Attendance Expected: _____

Restrooms: Yes _____ No _____

AS PERSON RESPONSIBLE I CERTIFY THAT ALL PARTICIPANTS/ATTENDEES WILL ALSO
COMPLETE THE ATTACHED COVID-19 RELEASE FORM

Agreement/Hold Harmless Clause

“I _____, by signing this request, hereby agree, contract and
(print name)

Covenant to fully save, indemnify and hold harmless the Township of Harmony from any and all claims, liabilities, judgements, verdicts or other expenses caused by the use of the Pavilion and surrounding facilities as requested in this written request including reasonable defense costs and attorney’s fees in the event of a legal claim or lawsuit being asserted against the Township as a result of such permitted use”.

I have read the foregoing Hold Harmless Clause and agree to its’ terms and conditions on behalf of the applicant.

Signature of Applicant

Date

I agree, on behalf of the indicated organization or group, that all members and guests will observe the regulations and that we, individually and as an organization or group, will assume full financial responsibility for any and all damages to preproperty during the indicated period of use.

Requesting Party Signature

Date of Request

COVID-19 RELEASE FOR USE OF FACILITIES AND RECREATION EVENTS

The novel coronavirus, COVID-19, had been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person to person contact. It is believed that an individual can be infected with COVID-19 without their knowledge and be asymptomatic. Harmony Township had put in place preventative measures to reduce the spread of COVID-19. However, Harmony Township cannot guarantee that I/We or anyone else will not become infected with COVID-19, including my spouse, guests, unborn child or relatives. Participation in a Harmony Township sponsored athletic sports program(s), related activity, event or using Harmony Township facilities could increase the risk of contracting COVID-19.

By signing this release, I/We acknowledge the contagious risk of contracting COVID-19. By signing this release I/We acknowledge the contagious nature of COVID-19 and VOLUNTARILY assume risk that I/We may be exposed to or infected by COVID-19 by participating in a Harmony Township athletic sports program(s), related activity, event or by the use of Harmony Township facilities and that such exposure or infection may result in personal injury, illness, permanent disability, and death to myself or others, including but not limited to, voluntarily accept and assume all the foregoing risks related to COVID-19 and accept sole responsibility for any injury or illness that may occur.

Further I/We understand and agree that this release includes any claims based on the actions, omissions, or negligence of Harmony Township, its employees, agents, officers, volunteers and assign, whether COVID-19 infection occurs before, during, or after participation in any Harmony Township athletic sports program(s), related event, activity or by the use of facilities.

Print Name

Signature

Date

Address

City, State, Zip