

32 Prince Street Newark, NJ 07103

Phone: (973) 642-4646 Fax: (973) 642-2218

website: www.citybloom.org

# **APPLICATION FOR FACILITY USE**

	☐ Individual	
	■ Non-Profit Organization	
	■ Business or Corporation	
ORGANIZATION NAME (IF APPLICABLE)	Organization Type (Please select one)	
CONTACT NAME	CONTACT PHONE	
Address		
Сіту	STATE ZIPCODE	
TELEPHONE NUMBER	FAX NUMBER	

Type of Event (Meeting, Reception, Party, Etc.)				
DATE OF EVENT	START TIME	END TIME		
ALTERNATE DATE	ALTERNATE START TIME	ALTERNATE END TIME		
PLEASE SELECT AREA(S) NEEDED FOR EVENT:	BRIEFLY DESCRIBE EVENT:			
☐ KITCHEN				
☐ MULTIPURPOSE ROOM				
☐ CLASSROOM B				
☐ CLASSROOM C				
☐ CLASSROOM D				
☐ GARDEN				
☐ TENT				
☐ OTHER:				

## **PRICING BREAKDOWN:**

ITEM	PRICE			
	TOTAL CONTRACTED FEE:			
50% Deposit:				
A deposit of 50% will be collected upon signing the rental agreement. Deposit will be returned if event is				
cancelled 10 days prior to event.	gg			
LUNDEDCTAND THAT, Coastan Navioni				
	Conservancy shall not be held responsible for injury to persons			
	ganization and the undersigned must assume full responsibility			
	l injury to persons thereon, and full responsibility for the			
	all responsibility for the proper observance of the regulations			
stipulated attached to this application.				
SIGNATURE OF PRESIDENT, CEO, OR PERSON LIABLE FOR EVENT MANAGEMENT				
FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE.				
DATE APPROVED/REJECTED	Reason for Rejection (If Applicable)			
Donate Street	- Comment Name of Comment of Comm			
DATE OF EVENT	Greater Newark Conservancy Signature			
	DATE OF DEPOSIT:			
	Date of Final Payment:			
	Deposit Returned:			

## **HOLD HARMLESS AGREEMENT:**

, the un, and its officers, ag harmless from any and all liability, demands, cla	for the purpose of dersigned agrees to indemnify, defend, and hold gents, members, servants, employees, and assigns ims, suits, losses, injuries, damages, judgments,
I understand that this Hold Harmless Agreement a indemnified from any and all liability, claims, dem resulting from the acts or omissions from any guest event herein referred to unless waived in writing by	also requires that Greater Newark Conservancy is ands, judgments, expenses and costs of any kind , participant, visitor or other person attending the
I agree to furnish a Certificate of Insurance as to individual) and a Certificate of Insurance specific additional insured, providing general liability, bo minimum limits of liability not less than:  • \$ 300,000 for an individual  • \$ 500,000 for non-profit organization  • \$1,000,000 for a profit making organization or contact.	ally naming Greater Newark Conservancy as an dily injury and property damage coverage with
The following information concerning the intended of a) Alcoholic beverages □ will □ will not be served. (Alcohol may only be served by a caterer who is less b) Live Entertainment □ will □ will not be proved. Total number of persons anticipated is  d) The names of all vendors who will be on premised (Vendors may be required to provide Certificate).	red. icensed and insured) ided s at any time for this event.
AUTHORIZED SIGNATURE  COMPANY/TITLE	WITNESS  COMPANY/TITLE
	DATE