

**SOMERSET COUNTY PARK COMMISSION
ENVIRONMENTAL EDUCATION CENTER
(908) 722-1200**

Room Rental Application

Signature and completed applications are necessary to process room rental reservations. Return this application to *Environmental Education Center, 190 Lord Stirling Road, Basking Ridge NJ 07920 Attn: Jane Bodnar, Administrative Assistant.*

Name of Organization: _____ Name of Applicant: _____
 Street/Address: _____ Phone Number: () _____
 _____ Alternate Contact: _____
 City/State/Zip: _____ Phone Number: () _____
 Email Address _____

1. Room requested: Auditorium Exhibit Hall Pond View Room Discovery Room Tree House Trails
 2. Date(s) requested: _____
 3. Beginning time (including set-up): _____ am/pm Ending time: _____ am/pm
 4. Maximum number of participants: _____
 5. Purpose of event: _____

6. Type of Setup: Classroom style _____ Theater style _____ Board Table _____ U-shape _____
 7. Additional needs: Head table _____ Podium _____ Cart for AV _____ Table for catering _____
 8. Will event be catered? _____ Will refreshments be served? _____ Coffee Urn Rental (\$10.00) _____
 9. Is event open to public? _____ Will donations be requested? _____ Additional Equipment (\$10.00 per item _____

10. Applicant must provide satisfactory evidence of comprehensive liability insurance in the aggregate amount of at least \$1,000,000 combined single limit and designated as primary in nature to that of the Somerset County Park Commission. Somerset County Park Commission must be named as additionally insured on this policy. A certificate of insurance, as described, must be provided to the Somerset County Park Commission before a reservation is confirmed. It can be mailed to the Environmental Education Center at the address listed on the top of this application faxed to 908 766-2687. Attn: Jane Bodnar, Administrative Assistant, or emailed to jcbodnar@scparks.org

The applicant by his or her signature certifies that: **1.** All the information given is complete and correct, and that no false or misleading information, or false statements have been given. Giving false information or making false statements, in connection with this application may constitute a criminal violation. Violations will be the basis for denial or revocation of a reservation and may result in criminal prosecution. **2.** The attached rules and regulations for room rentals and all rules and regulations governing the use of the Somerset County Park Commission have been read, are understood, and will be fully complied with by applicant. **3.** The individual and/or the organization requesting a room rental reservation, agree(s) that while using the facilities made available by the Somerset County Park Commission that they will not discriminate in any manner against any person by reason of race, color, gender, disability, age, sexual orientation, national origin, or religious or political affiliation. **4.** Applicant has been duly authorized by the organization to execute this application on the organization's behalf.

Signature of Applicant (DO NOT PRINT) _____	Date _____	
Up to 30 people	31 – 99 people	100 + people
Gov't/Non-profit	Gov't/Non-profit	Gov't/Non-profit
Other	Other	Other
Weekdays 8am-5pm	\$50	\$100
	\$70	\$150
Evening meetings (After 5pm)	\$125	\$175
& Weekend meetings	\$150	\$225
	\$170	\$300

\$25 building attendant fee per hour for opening doors prior to 8am and for daytime meetings that are not completed by 5pm.
 Building can be occupied no later than 11pm.

OFFICE USE ONLY:
 Date received _____ Insurance received _____ Reservation confirmation issued _____ Payment received _____