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The Boys & Girls Clubs of Union County, Inc. Union Club
1050 Jeanette Avenue
Union, NJ 07083
(908) 687-2607

APPLICATION FOR USE OF THE POOL

The undersigned hereby makes application for the use of the Boys & Girls Clubs of Union County, Inc. Union Club's pool facility between the hours of 3:00PM and 4:30PM on the dates of Monday-Friday November 11, 2019 through February 15 2020.

This application is made for the purpose of Union High School Coed Swim Team for practice with meets to be scheduled between 3:00PM - 4:30PM.

This application, if approved, the applicant individually and the organization which is represented as agent, hereby agree to assume full liability for any and all damages to property and injury to persons therein during period of such use. Said damages or personal injury whether caused by employees/volunteers of the Boys & Girls Clubs of Union County, Inc. or otherwise ad responsibility for the proper observance of the following regulations lies with the applying individuals:

The board of Trustees of the Boys & Girls Clubs of Union County, Inc. and its supervisory staff here in after referred to as "Club Representative."

1. The Club Representative is solely responsible for granting permission to use the Boys & Girls Clubs of Union County, Inc. property for the rules and regulations governing such use, and for the rental charges to be paid. Members of the Board of Trustees and any of its representatives shall have full and free access to any part of the building and grounds at all times during such use.
2. Application for use of the Boys & Girls Clubs of Union County, Inc. facilities are to be made to the Club Representative. When a rental or service charge is required, payment must be made to the Boys & Girls Clubs of Union County, Inc. as stipulated below; otherwise the dates may be canceled at the sole discretion of the Club Representative. In addition, if there is reason to believe that use may involve damage beyond that of ordinary wear and tear, the Board of Trustees may require advance guarantee against loss thereby.
3. The Club Representative shall reserve the right to cancel any and all rental contracts for any reason whatsoever should such be deemed necessary or desirable, Authority for cancellation, termination of further delineation of said rules and regulations rests solely with the Club Representative.
4. A Certificate of Insurance is required in the amount of \$500,000 bodily injury and \$1,000,000 property damage naming the Boys & Girls Clubs of Union County, Inc. as an additionally insured. This certificate must be received by the Club Representative at least one (1) month prior to rental.
5. The lessee agrees to return premises in the same condition as it was at the outset of the rental period.

CHARGES: \$12000 (See Payment Schedule listed below)

Additional Regulations: The Boys & Girls Clubs of Union County, Inc. must approve all swim meets and at no time shall a meet be scheduled or rescheduled without approval of a Club representative of the Boys & Girls Clubs of Union County, Inc. Union Club.

Evidence of Insurance as stipulated, will be given in the name of _____

By (Insurance Company) _____

Address _____

Telephone _____

Organization _____

Signature of Applicant _____

Date _____

Printed Name of Applicant _____

Address _____

Home Phone _____

Business Phone _____

Signature of B&GCUC Representative _____

Date Approved _____

The Boys & Girls Clubs of Union County, Inc.:

1. Is not responsible for the loss or damage of personal property.
2. Reserves the right to use of the pool, or the assignment of the same, during the agreed rental times when the Board of Education does not use the pool.
3. Has the authority to eject any team representative or visitor for not following the rules and procedures of the Boys & Girls Clubs of Union County, Inc. Union Club.

The Management of the Board of Education and its designers agrees to:

1. Payment for all damages to equipment and facilities incurred during agreed rental usage time by anyone connected with and including opposing teams, spectators and other guests.
2. Swim meets not exceeding the allotted time unless previously agreed upon by with the Aquatic Director of the Boys & Girls Clubs of Union County, Inc. Union Unit.
3. Enforce the rule, which states that at no point in time should students or visitors be on the pool deck without a school authorized supervisor present.
4. Enforce the rule which states that the school is responsible to assure that the students adhere to all Boys & Girls Clubs of Union County, Inc. policies and procedures when on the Club premise including specific in writing and distributed to all students, coaches, and other school representatives.
5. Comply with the rule stating that all coaches must have **current certification in first aid and CPR.**

PAYMENT SCHEDULE

\$2500 TO BE PAID OCTOBER 25, 2018
\$2500 TO BE PAID NOVEMBER 25, 2018
\$2500 TO BE PAID DECEMBER 25, 2018
\$2500 TO BE PAID JANUARY 25, 2019
\$2000 TO BE PAID FEBRUARY 25, 2019
\$12000



UNION-5

OP ID: DV

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/28/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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| PRODUCER Fairview Insurance Agency Associates, Inc. 25 Fairview Avenue Verona, NJ 07044 Lawrence K. Graham, CIC | 973-857-0870 | CONTACT NAME: Danielle Voda, CIC PHONE (A/C, No, Ext): 973-857-0870 FAX (A/C, No): 973-857-9645 E-MAIL ADDRESS: dvoda@fairviewinsurance.com |
| | | INSURER(S) AFFORDING COVERAGE NAIC # |
| | | INSURER A: American Alternative Insurance |
| | | INSURER B: N J School Boards Assoc. |
| | | INSURER C: |
| | | INSURER D: |
| | | INSURER E: |
| | | INSURER F: |

INSURED
 Township of Union Board
 of Education
 2369 Morris Avenue
 Union, NJ 07083

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|---|---|-----------|----------|-------------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | X | | GPPAPF 6056514-02 | 07/01/2019 | 07/01/2020 | EACH OCCURRENCE \$ 1,000,000 |
| | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 |
| GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | | | | | |
| OTHER: | | | | | | | |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | GPPAPF 6056514-02 | 07/01/2019 | 07/01/2020 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 |
| | | | | | | | BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE | | | GPPAPF 6056514-02 | 07/01/2019 | 07/01/2020 | EACH OCCURRENCE \$ 10,000,000 |
| | | | | | | | AGGREGATE \$ 10,000,000 DED RETENTION \$ |
| B | <input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N <input type="checkbox"/> N / A If yes, describe under DESCRIPTION OF OPERATIONS below | | | W302AK | 07/01/2019 | 07/01/2020 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER \$ |
| | | | | | | | E.L. EACH ACCIDENT \$ 2,000,000 |
| | | | | | | | E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

ANY ALTERATIONS WILL VOID THIS CERTIFICATE. Certificate holder is afforded additional insured status as per the embedded coverages found in the coverage form when required by written contract but only as respects to the liability of the insured, pursuant to the terms, conditions, limitations and exclusions of the listed policies with respects to Township of Union Board

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| CERTIFICATE HOLDER The Boys & Girls Club of Union County, Inc. Union Club 1050 Jeanette Avenue Union, NJ 07083 | CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| AUTHORIZED REPRESENTATIVE <i>John F. Graham</i> | |

August 20, 2019

Director of Athletics, Physical Education and Nurses: Linda Ionta,
Union Board of Education - Administrative Building
2396 Morris Avenue
Union, NJ 07083

Dear Ms. Linda Ionta

Enclosed is an application for use of the Boys & Girls Clubs of Union County, Inc. Union Unit swimming facility for the 2018-2019 season. Please take notice that your pool time for practice will be 3:00PM to 4:30PM and swim meets will be from 3:00PM - 4:30PM. Before scheduling swim meets, please contact Yefim Shoykhet, Aquatics Director, for swim meet date availability.

Please complete the enclosed application, sign and return to my office as soon as possible. Upon receipt, we will sign and forward copy to you.

As stated in section four (4), a Certificate of Insurance is due at least one (1) month prior to use of our facility.

As in the past, the Boys & Girls Clubs of Union County, Inc. will serve as a home pool to other school districts. Therefore, it is imperative that you provide us with a 2018—2019 meet schedule as soon as possible. No Swim Meets are to be rescheduled without approval of the Boys & Girls Clubs of Union County, Inc. Union Unit.

Thank you for your continuous cooperation and if you have any questions please contact me at (908) 687-2697 ext. 109.

Sincerely,

Yefim Shoykhet
Aquatic Director