



RIEGEL RIDGE COMMUNITY POOL PAVILION APPLICATION 2024

Pavilion rental includes two-hour use of the pavilion for up to 40 guests.

We require a guest list prior to your guests arriving. *Please do not email your list, bring a physical copy.*

Holland Township Residents: \$240 Non-Residents: \$280

Requirements due at signing of contract: 1.) 100% of total rental fee and 2.) copy of certificate of homeowner's insurance. (Applications will not be accepted without both payment and insurance.)

We reserve the right to cancel your party due to inclement weather.

Applicant Information *must be one in charge of event & over 21*

First Name: _____ Last Name: _____

Organization Name (if applicable): _____

Address: _____ Apt. #: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Other: _____

Cell Home Cell Home

Primary E-mail (Required-This is our primary source of communication - used for RRCC communication only)

Rental Information

Type of Event:	Please Check One: <input type="checkbox"/> Private Use <input type="checkbox"/> Non-Profit <input type="checkbox"/> Profit
Date of Event:	Rain Date:
Hours of Rental (2-hour blocks) Check One: 1:00pm - 3:00pm <input type="checkbox"/> 3:30pm - 5:30pm <input type="checkbox"/>	Hours of Rental (2-hour blocks) Check One: 1:00pm - 3:00pm <input type="checkbox"/> 3:30pm - 5:30pm <input type="checkbox"/>
Number of Guests (40 MAX):	We require a list prior to the Event Date
Special Provisions/Requests:	



Riegel Ridge Community Center Pool
910 Milford-Warren Glen Rd.
Milford, NJ 08848
908-995-9260
www.riegelridgecc.org

Applicant is hereby made to use the Riegel Ridge Facility as specified above. I agree on behalf of myself and/or my organization as the contact person, that all members and guests will observe all regulations and that I/we individually, and/or as an organization will assume full financial responsibility for any and all damages done to the Riegel Ridge Community Pool property during the above indicated period(s) of use. I understand that alcohol is not permitted on the pool grounds. I/we agree that our organization and/or I will at all times hereafter, indemnify the above-named facility against any loss, damage, or expense of any kind, which said facility may sustain or incur because of use of the above described building by our organization, and I/we will further hold said facility harmless for loss of any kind in connection therewith.

Renter Signature: _____ Date: _____

RRCP Supervisor/Manager/Director Signature: _____

For Office Use Only

Paid: _____ Date: _____ Employee Initials: _____

Insurance

Full Payment