



BOROUGH OF POINT PLEASANT

Department of Recreation

1001 River Avenue, Point Pleasant, NJ 08742

(732)892-5813 fax: (732)892-1713

RULES AND REGULATIONS FOR RIVERFRONT PAVILION 2020

All pavilion reservations for groups from 10 to 100 people are taken on a first come, first serve basis. Over 100 please contact office prior to application submission. Applications and payments must be submitted at least three weeks before your requested date.

No refunds will be given on pavilion reservations. Dates are non-transferable. If the weather is poor, the event may be rescheduled through the recreation department for a different available day. A rain date cannot be reserved prior unless you make payment for both dates.

Permit fee is for a 4-hour time block. 9AM-1PM, 1PM-5PM, 5PM-9PM (Summer only). Times can vary and need to be coordinated at the time of request.

Prohibited items

- Poles, stakes, holes, tents, tarps or any shelters in the ground. Carnival equipment, including moon bounces, inflatable slides, etc. (This type of equipment is only allowable to borough organizations who specify this on their application. Sandbags are allowed.)
- Propane grills, wood fires, bonfires.
- Any type of tape is prohibited from being used. Do not tape to anything in the park.
- No alcoholic beverages of any type.

Patrons Responsibility

- Charcoal for grilling. Please do not dispose of embers in the tree areas or trash under any circumstances. Make sure that all fires are extinguished before leaving the park.
- If applicable, outside caterers must meet all Health Department and Fire codes guidelines.
- Clean up of all trash and use of proper containers. Garbage cannot be left overflowing from cans. Carry In, Carry Out. You must remove everything you brought in, including trash.
- Groups must obtain a Certificate of Insurance when over 100 people and must be presented with application to be considered.
- Any damage to park property or disregard of park rules and regulations will result in denial of future reservations.
- Please be respectful of the event before and after yours.
- Your reservation time slot INCLUDES your set up and clean up time.
- You must vacate the pavilion at the end of your event time.



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Riverfront Pavilion Reservation Form 2020

Responsible Party: _____

Email: _____

Date of event: _____ Start Time: _____ End Time: _____

Permits will be emailed to the responsible party. If you would like it mailed, you must include a self-addressed envelope.

Street: _____ Daytime Phone #: _____

Town: _____ State: _____ Zip: _____

Max # of people attending: _____

Pavilion Fees are as follows (please check):

All picnics with over 50 people attending will require a Public Works worker at \$50 per hour for the length of the event.

Up to 25 persons attending \$50 _____ 26-50 persons attending \$75 _____

51 to 100 persons attending \$100 _____ Over 100 persons attending \$200 – contact office prior

Public Works Staff \$50 per hour (4 hour minimum) _____

Total payable to Borough of Point Pleasant: \$ _____ Check, Cash or Money Order is accepted.

If you have any issues on the day of your event with your permit, please call the Point Pleasant Police Non-emergency number at (732)892-0060.

Return completed application to the Recreation Center at 1001 River Avenue Point Pleasant, NJ 08742.

I have read the above rules and regulations and agree to abide by these terms and conditions listed above. Responsible Party Signature: _____

Office Use:

Date Received: _____ Check #: _____ Permit Issued: _____ Insurance: _____ COVID Waiver: _____

**Borough of Point Pleasant
RECREATION DEPARTMENT**

ACKNOWLEDGEMENT OF RISK – WAIVER & RELEASE OF ALL CLAIMS

By my signature here, I attest that I am the responsible party for _____. I have received and read Governor Murphy’s Executive Order #149, reviewed the CDC Guidelines and the NJ Department of Health Guidelines for COVID-19. I will also keep current on any new or revised guidelines as they are released. I am prepared and able to implement and abide by these rules while using municipal facilities and shall hold the municipality harmless from liability.

I further acknowledge and understand that failure to abide by these rules may result in my permit being revoked for the entire duration of the COVID- 19 public health emergency.

Name of Group: _____

Representative Name: _____

Address: _____

Cell Phone: _____

Representative Signature: _____