



County of Cape May
4 Moore Road
Cape May Court House, NJ 08210

APPLICATION FOR USE OF ALL PARK GROUNDS AND FACILITIES
(PLEASE PRINT)

1. Name of Applicant/Organization: _____
2. Organization's Address _____
3. Activity Planned: _____
4. Date(s) of Activity: _____ Starting Time: _____ Ending Time: _____
5. Applicant's Name: _____ Phone: _____
(PLEASE PRINT)
6. Applicant's Address: _____
(PLEASE PRINT – HOUSE/APT.#. STREET, CITY, STATE, ZIP CODE)
7. Applicant's Email: _____
(PLEASE PRINT)

RULES FOR COMMUNITY USE OF PARK & ZOO FACILITIES

1. All requests must be made in *writing* to the Park & Zoo, 4 Moore Rd. DN 801, Cape May Court House, NJ 08210 Attn: Jean Whalen

- No pets are permitted in Park Central and/or the Zoo.
Dogs are permitted in Park North, East and South.
- Park hours are 7:00 am – Dusk.
- The speed limit is 9 ½ mph inside the Park.
- Children must be with chaperones.
- Recreational vehicles/equipment of any kind is strictly prohibited
- Visitors may not sit, stand on or climb on exhibits, fences, railings or gardens.
- Music is permitted but should not interfere with other patrons. Park officials reserve the right to lower the music.

2. Smoking is not permitted in the Zoo.

3. Alcoholic beverages are not permitted in any Cape May County Park facilities.

4. All furniture must be returned to original arrangement and area(s) cleared of trash/recyclables which must be put in proper containers. **All groups are required to clean up after themselves.**

5. All equipment & arrangements shall be under the control of County of Cape May employees.

6. Cape May County Park Staff have the right to have free access to all grounds at any time.

- 7. Cape May County Park Staff are authorized to stop any meetings/activities when the person in charge fails to enforce County of Cape May policies and procedures or fails to maintain standards of good behavior.
- 8. Any changes by the applicant must be made in writing and made in ample time to act upon the same.
- 9. Rules may be changed or added to periodically.
- 10. Any applicant intending to use a facility shall provide the County of Cape May with proof of liability insurance as follows:
 - General Liability: \$1Mil per occurrence, \$2Mil Aggregate, \$50,000.00 Property Damage
 - Workers' Compensation: Per NJ Statute, \$1Mil each accident, \$1Mil Disease
 - Umbrella Liability: \$500,000.00 each occurrence, \$500,000.00 aggregate
 - If a professional organization (Engineer, Architect, etc.): Professional liability coverage of \$1Mil
 - County of Cape May, 4 Moore Road, Cape May Court House, NJ 08210 shall be named as Certificate Holder and also as Additional Insured.

The applicant shall not be allowed to access the facility until it has obtained and supplied the County of Cape May with copies of the insurance it has obtained as required by this paragraph (when applicable).

All coverage shall be with insurance carriers licensed and admitted to do business in the State of New Jersey and acceptable to the County.

To the fullest extent permitted by law, _____ (applicant) agrees to defend, pay on behalf of, indemnify and hold harmless the County of Cape May, its elected and appointed officials, its agents, employees and volunteers and others working on behalf of the County of Cape May against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from the County, its elected and appointed officials, its agents, employees, volunteers or others working on behalf of the County, by reason of personal injury, including bodily injury or death and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with Applicant's use of Facility.

WITNESS:

APPLICANT

Signature of Applicant: _____ Date: _____

Signature of Staff Accepting Form: _____ Date: _____

Final Approval Signature: _____ Date: _____

FOR COUNTY USE ONLY			
Has applicant supplied proof of insurance?	Y	N	N/A
Insurance submitted is in required amounts.	Y	N	N/A
County is named as additional insured.	Y	N	N/A