Statement of Compliance with the

Saddle River Board of Education – Policy #5141.8

Concussion & Head Injury

I,		,
	pri	int name
on beh	nalf of	
		of organization
(hereir	nafter referred to as "Licensee"), her	reby certify to the following:
1.	and the Licensee are Parties to a U (hereinafter referred to as the "Agr	tion (hereinafter referred to as the "Licensor") se of Public School Facilities Agreement reement") entered into on purpose of permitting the Licensee to utilize
	the facility to be used	(herein referred to as the "facilities"
	for the purpose of	
2.	hereby agrees to comply with Boar	:40-41.5(a) (2), the Licensee has read and rd Policy #5141.8 "Concussion & Head Injury", ade a part hereof in connection with its use of greement.
WITNESS:		LICENSEE:
Dated:	·	Dated:

BOARD OF EDUCATION SADDLE RIVER SCHOOL DISTRICT 97 E. ALLENDALE ROAD SADDLE RIVER, NJ 07458

FEE SCHEDULE – USE OF FACILITIES

RENTAL FEES ARE PER DAY

CAFETERIA -	\$50
CLASSROOM -	\$25
GYMNASIUM -	\$50
PLAYING FILEDS	- \$20
LIBRARY -	\$50
OTHER -	\$40

Custodial & Energy charges will be billed based on actual time & usage.