

LONG HILL TOWNSHIP

Megan's Law Community Organization Application

LONG HILL TOWNSHIP POLICE DEPARTMENT

264 Mercer Street, Stirling, NJ 07980

908-647-1800 Fax 908-647-8587

www.longhillnj.org/police

MEGAN'S LAW COMMUNITY ORGANIZATION APPLICATION

ELIGIBILITY: Megan's Law (N.J.S.A. 2C:7-1 et. seq.) entitles certain community organizations and agencies to receive information regarding certain registered sex offenders. IN ORDER TO QUALIFY TO RECEIVE SUCH NOTICE, THE APPLICANT MUST OWN, OPERATE OR MANAGE AN ORGANIZATION OR AGENCY WHERE CHILDREN GATHER UNDER THEIR CARE (WITHOUT PARENTS PRESENT), OR WHERE WOMEN ARE CARED FOR.

PROCEDURE: Application should be made to the police department servicing the actual location where children gather or where women are cared for (see below.) Please complete this application and return it to your municipal police department. That department will then forward the application to the Prosecutor's Office. The Prosecutor's Office will then determine your eligibility. If your agency qualifies as a "registered community agency" you will then be authorized to receive notification regarding certain registered sex offenders.

NAME OF AGENCY/ORGANIZATION: _____

CONTACT PERSON: _____ PHONE: _____

MAILING ADDRESS: _____

CITY: _____ ZIP CODE: _____

ACTUAL LOCATION WHERE CHILDREN OR WOMEN GATHER (i.e. In the case of Girl Scouts or Boy Scouts, the "actual location" is the place or places where meetings are held because that is where the children gather under the care of the scout leader. In the case of team sports, the actual location is where the practices and games occur.) BE SPECIFIC ABOUT THE LOCATION BY USING NAMES OF CROSS STREETS AND OTHER IDENTIFYING INFORMATION.

DAYS AND TIMES WHEN MEETINGS/GATHERINGS OCCUR HOW OFTEN AND THE CIRCUMSTANCES WHICH BRING THE CHILDREN OR WOMEN, UNDER YOUR CARE OR SUPERVISION (i.e. Children are left in our care for their dance class which meets every Tuesday from 4:00 PM to 5:00 PM.)

AGES OF CHILDREN BEING SUPERVISED: _____

NAME OF SITE SUPERVISOR/SCOUT LEADER (IF DIFFERENT FROM CONTACT PERSON): _____

CONTACT NUMBER FOR SITE SUPERVISOR/SCOUT LEADER: _____

Signature of Responsible Person Date _____

If you need assistance completing this form, contact: Lt. Dan Hedden at 908-647-1800 ext. 228.

Please fax or mail a copy of this application to the Long Hill Township Police Department

Updated Dec 9, 2002

Please [send comments to the webmaster](#) from this or any other page.