

CORNISH FAIRGROUNDS

Application for Event Use

Use Fee To Be Completed By Fairgrounds Committee

Type of Use: Profit (any concern holding an event for personal gain) Non-profit (any concern holding an event on behalf of a registered non-profit organization) Private (not registered as nonprofit but not for personal financial gain)

Length of Use: _____ Days X _____ Daily Fee = _____ Grounds Fee

Sanitary Facilities Rental: _____ Double (1 regular + 1 handicap) \$210.00; _____ Regular \$85.00

Water/ Electric: _____ Meter will be read and calculated at \$1.15/kwh

\$100.00 deposit to be reconciled when event completed.

Charges due prior to event \$ _____ (Non-profit includes 5% of revenues)

Reconciled charges due within 1 week after the event.

Signed: _____ (Fairgrounds Committee Representative)

Name of Applicant: _____ Date: _____

Contact Person: _____ Phone: _____ Fax: _____

Address: _____

Date _____ and _____ Times _____ for
Event: _____ Profit/Nonprofit/Private _____

Non-Profit Certificate Copy: _____ Setup Time: _____ Breakdown Time: _____

Description for Use: _____

User is **required** to submit "Certificate of Liability Insurance" 1 week prior to the event. The certificate of liability should name the **Town of Cornish** as "additionally insured". Payment is requested 1 week prior to the event. Cost of toilet facilities is the responsibility of the user and payment is required 1 week prior to the event.

Restrictions and Limitations:

The signing of this agreement by the applicant (user) shall guarantee to the Cornish Fairgrounds Advisory Board that the user understands, and shall abide by any specific restrictions and/or limitations required by the Cornish Fairgrounds Advisory Board for this specific use and the general restrictions and limitations listed on the attached sheet. Also, the user shall be liable for any costs that accrue to the Cornish Fairgrounds Advisory Board for the user's failure to abide by these restrictions and limitations for the event. This document is nonassignable.

Print Name: _____ Sign Name: _____ Date: _____

Please mail or fax application to: Phone 207 793 3692, Fax 207 625 3281

Glenn Rankin C/O Cornish Fairgrounds

1876 North Rd

Cornish, Me 04020

rev 6/13/14

