

APPLICATION AND AGREEMENT FOR USE OF THE TOLLAND COUNTY AGRICULTURAL CENTER, INC.

Complete in duplicate and submit to the *Tolland County Agricultural Center, Inc., 24 Hyde Avenue, Vernon, CT 06066.*
A copy will be returned to you after consideration by the Center.

Date of use: _____

Hours of use: _____

User Group or Organization: _____

Event and Activities to be conducted at event: _____

Time required for set up or clean up: _____

Facilities Requested: Please check the box *BEFORE* the facility desired.

- John Elliott Office Building
- John Elliott Office Building Kitchen (capacity 75)
- Activities Building (Gold)
- Activities Building Kitchen
- Holden Pavilion
- Horse Show Rings, Refreshment Stand, Secretary's Booth, Hunt Course, Sound System and Outside Lavatory.
- Livestock Building (Green)
- Red Barn
- Niederwerfer Barn (White)
- Grounds Only (includes outside lavatory facilities)
- Sound System

Donation for use of the facilities requested will be \$ _____.

The total amount is payable within five calendar days of use of the facilities. Additional maintenance fee may be required for extra rubbish removal or cleanup.

As and if required in accordance with the attached Rules and Regulations, an insurance certificate must be on file with the Tolland County Agricultural Center, Inc. ten calendar days prior to the event.

HARMLESS CLAUSE: The user group or organization agrees that the Tolland County Agricultural center, Inc. shall not be held responsible for any accident or damage to person(s) and/or property which occurs as a result of a program held on the property and/or grounds of the Tolland County Agricultural Center, Inc.

The user hereby agrees to pay for any damages incurred through their use of the buildings or grounds.

In making this application the user agrees to abide by the Rules and Regulations of the Tolland County Agricultural Center, Inc. In addition, the undersigned has read and understands the attached Rules and Regulations and agrees to abide by them.

Name of User Organization (if applicable): _____

By: _____

(Name and Title of responsible User Organization Officer)

(Applicant Name and Title)

Applicant Address: _____ Applicant's Phone Number (____) _____

Person in charge of the event (if other than above): _____

Person's Address: _____ Person's Phone Number (____) _____

OFFICE USE ONLY

Approved: _____ Rejected: _____

By: _____

(Name and Title)

Date of Request: _____

Amount of Deposit: \$ _____