

# Nemacolin, Inc. Event Permit

Date: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Name of Requested Event: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Dates(s) of Event: \_\_\_\_\_ Rain / Alt. Date: \_\_\_\_\_

Will you be renting / using the pavilion? \_\_\_\_\_ Yes \_\_\_\_\_ No

Hours of Event: Set Up Begins \_\_\_\_\_ am/pm Dismantle by \_\_\_\_\_ am/pm

Operating Hours: Start \_\_\_\_\_ am/pm End \_\_\_\_\_ am/pm

Estimated attendance: \_\_\_\_\_

How many volunteers will be involved: \_\_\_\_\_

Will money be collected at the event: \_\_\_\_\_

How will money be collected and who will it benefit: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_

## REVIEWED:

Nemacolin, Inc. Board: Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments: \_\_\_\_\_

Facility Fee \$ \_\_\_\_\_ Donation \$ \_\_\_\_\_

Date Paid \_\_\_\_\_ Cash/Check Number \_\_\_\_\_

Certificate of Insurance: Received in office on \_\_\_\_\_

Payment and Insurance received by \_\_\_\_\_

Please initial that you have received the following

Event Permit \_\_\_\_\_

Pavilion User Agreement \_\_\_\_\_