



EVENT APPLICATION

APPLICANT INFORMATION

Date of Application: _____

Name of Organization: _____ Phone: _____

Street Address: _____ Fax: _____

City/Town: _____ Zip: _____

Contact Person: _____ Phone: _____

Email address: _____

EVENT INFORMATION

Location: _____

Date of Event: _____ Start Time: _____ End Time: _____

Is this a fundraiser? ☐ Yes ☐ No If yes, to benefit: _____

Detailed Description of Event: _____

****Please provide copies of anything to be distributed to the public****

I certify that the above information is correct under penalty of RSA 641:3, Unsworn Falsification. I agree to hold harmless the Town of Rye, its employees, volunteers and agents of any/all injuries and damages incurred during the course of the above mentioned fundraiser.

Print Name: _____ Signature: _____

TOWN APPROVAL

Select Board: yes ☐ no ☐ Date: _____

Conditions/Details: _____
