



**Fox Township Park
Contract for Booth Set-Up**

PLEASE COMPLETE ALL AREAS ON ALL PAGES OF THIS APPLICATION.

Event – _____

Date: _____

Name of Organization aaaaaaaaaaaaaaaaaaaaaa _____

Contact Person: _____ Hm Phone: _____ Bus Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Alternate Contact: _____ Hm Phone: _____ Bus Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Limited electricity will be available –PLEASE No Roasters! Space is first-come-first-served.

Please list the set-up items that you are bringing: (Ex. Tent size, total tables, Grill, etc.)

*****All tents in line with the firework display must be lowered or pulled down before show time.*****

List all items to be sold at your booth:

*****There cannot be any changes to this list on the day of the event. All items will be approved by the park director before the event.*****

Intending to be legally bound, we hereby (1) agree to comply with the conditions of Fox Township governing the use of facilities and agree to assume full responsibility for injury or damage to Township property occasioned by such use of the above described accommodations and special permission herein granted, and will make same good without expense to the Township, (2) understand that our execution of the release and indemnification agreement in the form attached is a condition precedent to Fox Township’s approval of this permit, and (3) acknowledge having received, examined and agreed to the several Fox Township Facility Use Rules detailed in the form attached hereto.

Signature of Applicant or Authorized Agent for Applicant: _____

Release and Indemnification Agreement

Know all persons by these presents, that _____ (outside group or organization), for and in consideration of the permission granted by the Fox Township Board of Supervisors to use _____ (name and description of facility) on _____ (date(s), does hereby remise, release and forever discharge Fox Township, its governing body, officers, employees, agents, successors, and assigns, of and from all and all manor of actions, causes of action, suits, debts, dues, judgements, contracts, obligations, liabilities, agreements and all other claims and demands of any nature whatsoever, whether at law or in equity, especially including but not limited to all claims, obligations and liabilities which the undersigned now have or which may hereafter accrue on account of or in any way growing out of any all known and unknown, foreseen and unforeseen ,temporary or permanent bodily and personal injuries and property damage and the consequences thereof resulting or to result form any accident, incident, casualty, or event occurring on or about the date or dates written above and in connection with the use of the above -described facility of Fox Township, including ingress and egress thereto and therefrom; and including any such claim or demand which against the said Fox Township, its governing body, officers, employees, agents, successors, or assigns, governing body, officers, employees, agents, invitees, or guests, shall or may have, for, or by reason of any cause, matter or thing whatsoever, from the beginning of the world to the date of these presents.

And, furthermore, the undersigned does hereby expressly stipulate and agree, in consideration of the benefits to the undersigned described hereinabove, to indemnify and hold forever harmless the said Fox Township, its governing body, officers, employees, agents, successors and assigns against loss hereinabove, including the reasonable cause of defense thereof and the undersigned hereby waives any and all right of exemption or contribution to which it may be entitled under the laws of this or any other State as against such claim or indemnity.

In witness whereof, and intending to be legally bound, _____ (outside organization or group) has hereunto set its hand and seal the _____ day of _____, 20____.

Person in Charge

Outside Group or Organization

Witness from outside group or organization

By: _____

Office use only:

Contract Received (date): _____

Insurance Certificate Received: _____

Booth Fee: _____

Non-profit number Received: _____

Fee Collected Date: _____

Application is _____ Approved

_____ Not Approved

Date: _____ By: _____