

# 2019 OUTREACH PROGRAM

## Application Form

Name of Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

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

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

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

Date of Event: \_\_\_\_\_

Area of the Fairgrounds Requested: \_\_\_\_\_

Purpose of Event:

Equipment Needed:

Is this an annual Event? Yes\_\_\_\_\_

No\_\_\_\_\_

PLEASE NOTE: Labor and supplies **will not** be provided by the Fairgrounds