

Requested Event Date _____.

Fairfield Hills Campus Use Application - Special Events

Town of Newtown, Fairfield Hills Authority

3 Primrose Street

Newtown, CT 06470

Attention: Christal Prezler

Phone (203) 270-4282 Fax (203) 270-4278 Email: christal.prezler@newtown-ct.gov

This application must be filed a minimum of thirty (30) working days prior to the date of the event.

The completed application form will be reviewed and upon approval of the request, the applicant will be contacted in writing with formal approval for the event to take place.

Date of Application _____ Non-Profit Tax Exempt Number _____

(A copy of your organization's tax-exempt certificate must be provided with application)

Name of Organization _____

Type of Organization _____

Phone Number _____ (day) _____ (evening)

Website of organization or event _____

Name and Address of Applicant/Supervisor of activity _____

Phone number of Applicant/Supervisor of activity _____ (home) _____ (other)

Email address of Applicant /Supervisor of activity _____

Specific Date(s) when site is required _____

Location where activity will be held _____

(please note on campus map)

Hours of use: From: _____ (AM/PM) to: _____ (AM/PM) (must include set up time)

Estimated number of attendees _____ youth _____ adults

Nature of activity _____

Are you requesting a donation or charging a fee or admission? Yes / no Amount \$ _____

How will proceeds be used? _____

Insurance information provided yes / no (certificate of insurance must be on file 14 days prior to event date)

Is event open to the general public? yes/no

Do you request permission to serve food? yes / no

Do you request permission to serve alcohol? (special permit required) yes / no

Do you plan on posting signs? yes / no locations: _____

Will tents be set up? yes / no size of tents: _____ square feet total.

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