

SHOW DATES: July 7th, 8th & 9th of 2017 Received at office:
Date issued: _____ Date: _____

THE SOUTH LAKE COUNTY AGRICULTURAL HISTORICAL SOCIETY, INC.
Crown Point, Indiana

APPLICATION FOR CONCESSION SPACE

Please print:

Name: _____ Sales Tax # _____

Street: _____ Phone # _____

City: _____ State: _____ Zip: _____

SPACE FOR 3 DAYS

Cost

Up to 10 foot minimum serving area - \$175.00 \$ _____

\$15.00 per foot over 10 Ft. \$ _____

Electric hook up (checked by electrician) per drop
Electrical payment due with contract.

Amps needed: 110 - \$60.00 220 - \$90.00 (circle one) \$ _____

TOTAL \$ _____

Items to be sold must be listed here: Only those items listed will be permitted to be sold.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Location to be assigned by Concession Chairperson.

SIGNED: _____ SIGNED: _____
Lessee For the Society

CONDITIONS OF CONTRACT:

The exhibitor's use of the assigned space and the fairgrounds will be subject to the following conditions:

1. The rental fee entitles the exhibitor to use the space from 6:00 a.m. on Thurs. July 6th through 7:00 p.m. on Sunday July 9th.
2. The exhibitor's space must be manned at all times by the person responsible or a designee for the exhibition.
3. No food or drinks are to be sold unless you have an appropriate food contract.
4. The South Lake County Agricultural Historical Society, Inc., is not responsible for any loss or damage to the person or property of the exhibition or to its employees from fire, act of God, or otherwise, and is hereby released from any and all liabilities of any kind.
5. The exhibitor shall abide by all laws of the State of Indiana, County of Lake, and the city of Crown Point.
6. The South Lake County Agricultural Historical Society, Inc., shall assign the exhibitor space at its discretion within the exhibition area and the assignment of the Society shall be final. Space shall be assigned by the Society for the best advantage of the total exhibition.
7. If not covered by the South Lake County Agricultural Historical Society, Inc.'s insurance the exhibitor shall and will, indemnify and hold any and all County entities, including but not limited to the County of Lake, the Board of Commissioners of the County of Lake, the Lake County Fairgrounds, its elected officials, its appointed officials, its officers, its employees, its departments or boards and/or agents harmless from and against all damages, injuries, losses, claims, demands or costs proximately caused by the fault, culpability or negligence of the exhibitor, its officials, officers, employees and/or agents during the exhibition.
8. The exhibitor shall be responsible for any damage to property at the Lake County Fairgrounds owned by the County of Lake that is damaged or destroyed by the Exhibitor or by acts of persons for which the exhibitor is responsible.
9. The exhibition is being sponsored by the South Lake County Agricultural Historical Society, Inc., and exhibitor agrees that the Society shall retain authority to manage the total exhibition area on the dates of the exhibition.
10. If the exhibition is cancelled because of any act of God or any event beyond the control of the Society prior to 8:00 a.m. on Thurs. July 6th the lease shall terminate and the exhibitor waives any claim to damage except the return of

Make sure that all are signed and payment is enclosed. Please send a certificate of ins.
I have read, fully understand, and agree to abide by the above conditions, regulations,
and restrictions governing the use of the above facilities at the Lake County
Fairgrounds and for the strict observance of the rules and regulations relative to the
use of the facilities.

EXHIBITOR'S NAME _____

Please Print

SIGNATURE: _____

DATE OF APPLICATION: _____

The above application is hereby approved this _____ day of _____.

Chairman of Concessions
South Lake County Agricultural
Historical Society, Inc.

EXHIBITOR'S TICKETS ISSUED: _____