



TOWN OF BALDWIN, MAINE
534 PEQUAWKET TRAIL, WEST BALDWIN, ME 04091



EVENT REGISTRATION FORM

Name of Applicant: _____ Date: _____

Contact Person: _____ Phone: _____

Fax and/ or email address: _____

Applicant Mailing address: _____

Date(s) and Time(s) of Event: _____

Type of Event: (check one)

Profit Event (an event for personal gain)

Non-profit Event (an event on behalf of a registered non-profit organization)

Private Event (an event not registered as non-profit, but not for personal financial gain)

Event description:

By initialing each of the below, the applicant understands and agrees to each in accordance with the Event policy.

➤ Insurance liability and waivers are to be handled by the Event organization. The Town of Baldwin will be held harmless from all liability and loss due to any such damage or injury, including, but not limited to, reasonable attorney's fees. _____

➤ If event is to be held on town-owned property, a Certificate of Liability is required 1 week prior to event. The certificate of liability should name the Town of Baldwin as "additionally insured". _____

➤ Event fee is due one week prior to the Event. _____

➤ Applicant received, read and fully understands The Town of Baldwin Event Policy at its entirety. _____

Restrictions and Limitations: The signing of this agreement by the applicant shall guarantee to the Town of Baldwin that the applicant understands the Event Policy, and shall abide by any specific restrictions or limitations required by the Town of Baldwin Selectmen for this specific use and the general restrictions and limitations listed on the attached sheet. Also, the applicant shall be liable for any costs that accrue to the Town of Baldwin for the applicant's failure to abide by these restrictions and limitations for the event.

Applicant Name _____ Signature _____ Date: _____

Approved By: _____

(Baldwin Selectman)