



225 Edward Street
Chippewa Falls, WI 54729
www.nwsfa.com
715-723-2861

Activity Application Request Form

(Please Check Website for Major Events prior to submitting requests)

This application is to define events/activities/use for rental consideration of facilities and venue at Northern Wisconsin State Fairgrounds (NWSF). Please complete and check areas that apply to your request. All applications will be reviewed and a draft rental agreement will be issued if facilities are available. We reserve the right to accept/reject any application. **This is not a License or Contract to use the Fairgrounds.** (Print clearly as incomplete or illegible applications will not be considered)

Name of activity and/or event: _____

Name of firm and/or organizing group: _____
(Name as it will appear on license if approved)

Individual responsible for event: _____
(Name of contact person in charge of event)

Mailing Address: _____

(City)

(State)

(Zip)

Business Phone: _____ Cell Phone: _____ E-Mail: _____
(Contact Person) (Contact Person)

Is the organizing group a Nonprofit: Yes ____ (Name): _____

Dates, time of use:

Date(s) of Event: _____ Estimated Attendance: _____
(Month) (Dates) (Year)

Set-up time requested: _____ Daily hours of Operation: _____
(From) (Till) (From) (Till)

Building(s) requested: Expo Hall A: _____ Banquet Hall B: _____ Expo Hall C: _____ Leinenkugel Pavilion: _____
Leinie Lodge: _____ Leinenkugel Stage: _____ Northwestern Bank Grandstand: _____ WEAU Front Porch Stage: _____
Gate Ticket Booths: _____ Admin/Office space: _____ Youth/Ag Building: _____ Horse Barn: _____ Cattle Barn: _____ Other: _____

Areas requested: Full Grounds: _____ Parking: (inside fenced area) _____ (outside fenced area) _____ Horse Arena: _____ Kiddy Land: _____ Food Concession area: _____ Restroom Triangle Area: _____ Other: _____

Misc requests: Ticket Booths: _____ Picnic Tables: _____ Park Benches: _____ Signage: _____ Parking Lot set-up: _____ Food Stands: _____ Main P/A: _____ Games/Inflatables: _____ Tents: _____ Stage: _____ Refrigerated Beverage trailer: _____ Evening Street Lighting: _____ Banquet Tables/Chairs: _____

Type/Event Activities: Festival: _____ Trade Show: _____ Fundraiser: _____ Walk/Run: _____ Animal Show: _____ Benefit: _____ Company gathering: _____ Meeting: _____ Wedding Ceremony: _____ Wedding Reception: _____ Live Music: _____ D/J: _____ Catering at event: _____ Other: _____

Will Alcohol be sold: (Yes) ____ (No) ____ Do you have Liquor Liability: (Yes) ____ (No) ____

Will Alcohol be served: (Yes) ____ (NO) ____

Please explain your event and how profits will be used:

References:

Please provide two (2) references from past activities, or similar events where you have held or had experience with this type of event or activity.

Name of venue site: _____

Address: _____

Contact Person: _____ Position: _____

Phone: _____ E-Mail: _____

Name of venue: _____

Address: _____

Contact Person: _____ Position: _____

Phone: _____ E-Mail: _____

Liability Insurance:

Northern Wisconsin State Fair Association Inc. requires a current certificate of liability (COL) insurance (\$1,000,000. minimum) on file for every group, club or individual responsible for utilizing the Northern Wisconsin State Fairgrounds. We may request your insurance policy to review coverages. The licensee must be listed as the primary insured party and NWSF as additionally insured. This COL certificate must be submitted to the Fairgrounds Office two weeks prior to event and/or activity. Insurance is available through NWSF Liability Insurance Ryder if needed.

Liability Insurance Request: Yes _____ No _____.

Signature:

I certify that the information stated on this Activity Application Form is complete and true to the best of my knowledge.

(Owners signature as stated on the front of this form)

(Date)

Return Completed Form To:

NWSF
225 Edward Street
Chippewa Falls, WI 54729
Phone: 715-723-2861
Fax: 715-723-6557
info@nwsfa.com

09.01.2019