

**VANCE COUNTY REGIONAL FAIRGROUNDS  
FACILITY RENTAL REQUEST**

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_  
Fax Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**DATE(S) REQUESTED:**

Date(s): \_\_\_\_\_  
Proposed Hours of Operation: \_\_\_\_\_

**EVENT INFORMATION:**

Title of Event: \_\_\_\_\_  
Description: \_\_\_\_\_  
\_\_\_\_\_  
Anticipated Attendance: \_\_\_\_\_ Will alcohol be served?  No  Yes  
Does the event currently have liability insurance coverage?  No  Yes  
Insurance Company: \_\_\_\_\_  
Agent Name and Phone Number: \_\_\_\_\_  
Coverage Limits: \$ \_\_\_\_\_  
Have you held this event at any location prior to this year?  No  Yes  
If you answered yes to the above inquiry, please note the location, date and facility rented for the past event: \_\_\_\_\_

**APPLICANT SIGNATURE**

\_\_\_\_\_  
Signature Date

**APPLICATION ADDRESS & CHECKLIST:**

**VCRF Facility Rentals ♦ P.O. Box 868 ♦ Emporia, Virginia 23847**

Items due prior to date of rental:  Certificate of Insurance  Signed Hold Harmless Agreement  Signed Contract  \$500 Deposit

**FACILITY RENTAL FEE:** \$500/Day

**ADDITIONAL INFORMATION:** Contact Mark Novey, 434-348-3378