



Sawyer County Fairgrounds Reservation Application

Date _____

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

Name of Event _____

Lessee/Organization _____ Contact Person _____

Address _____

Phone/daytime _____ Phone/evening _____ Email _____

Areas Requested: Livestock Barn Milk house/wash rack
 Outdoor Arena Exhibit Hall *(limited availability)*
 Grandstand/Pull track/Demo Pit Pavilion

of Participants expected : _____ # of Spectators expected: _____

Will alcohol be on the grounds? _____ Will food be for sale? _____

Is this event open to the general public? _____

Description of Event:

Send application to: SCAFA
P. O. Box 13158
Hayward, WI 54843
Any questions, please call 715-934-2721

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For Office Use:

SCAFA meeting date: _____ Approved or Denied
* * * * *

SCAFA member assigned to event: _____

Certificate of Insurance: _____ Security deposit: check # _____

Use Fee: check # _____ Use Agreement Form _____

Other permits: _____