



TOWN OF BENNINGTON

THOMSON FAMILY STAGE REQUEST FORM

Name of Organization _____

Person Responsible _____

Address _____

Day Phone _____ Evening Phone _____

Activity Planned _____

Date of Activity _____ Start Time _____ End Time _____

\$40 REFUNDABLE SECURITY DEPOSIT MUST ACCOMPANY APPLICATION

CHECK ONLY MADE PAYABLE TO THE TOWN OF BENNINGTON

1. Performances and events must be organized by a local nonprofit organization and town staff will review each request.
2. Splash pad is in operation from 11 a.m. to 6 p.m. Memorial Day through Labor Day. Evening concerts can occur from 6 to 9 p.m.
3. No glass bottles or containers. There will be ***no alcoholic beverages*** consumed on the premises per Town of Bennington ordinance. No smoking or vaping.
4. Unruly behavior and/or excessive noise is reason for immediate termination of activity by the Bennington Police Department.
5. If more than 75 people are in attendance, you must contact the Bennington Police Department to discuss the event and determine if the presence of a safety officer is needed.
6. Certificate of Liability Insurance, with the Town of Bennington named as an additional insured, is required (\$1,000,000 minimum).

_____ I have read and agree to adhere to all above set rules.

_____ Proof of insurance is included with my application.

Renter's Signature

Date