



# TOWN OF MOUNT GILEAD

## Marquee Request Application Form



Name of Event: \_\_\_\_\_

Dates of Event: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Best Contact#: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\*\*\*\*\*

### Wording (Maximum of 19 Characters/ Numbers/ Spaces per line):

Line #1: \_\_\_\_\_

Line #2: \_\_\_\_\_

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**The applicant hereby indemnifies and holds the Town of Mount Gilead, its employees, officers, volunteers and agents harmless from all claims, demands and damages the Town, its employees, officers, volunteers and agents may incur as the result of the use of the marquee set forth in this application. Said indemnity shall include, but not be limited to, all costs of defense, including reasonable attorney's fees, expert witness fees and court costs incurred by the Town as a result of any such claim.**

**Applicant Signature:** \_\_\_\_\_