

**TOWN OF RICHLAND
APPLICATION FOR USE OF THE JOHN BEN SNOW
COMPLEX AND JOHN S. HALDANE ARENA**

Date of Application: _____

AREA TO BE USED

Field or Area _____ Haldane Arena _____ Pavilion _____

Date _____ Time _____

Organization Requesting Use: _____

Purpose: _____

Contact Name _____ Address _____

E-mail _____ Phone # _____

Number of persons expected to attend the event: _____

Name, Address and Phone # of Insurance Carrier and Agents Name and

Phone #: _____

Drop off application at the Town of Richland Supervisors Office or e-mail to
Tammie Whaley, supervisorclerk@townofrichland.org

Kevin Balcom/Haldane Supv: Approved _____ Not Approved _____

Town of Richland Supervisor: Approved _____ Not Approved _____

Haldane Committee Chair: Approved _____ Not Approved _____

Haldane conditions for approval (if any): _____
