



**Event Rental Application**  
 Sauck County Agricultural Society, Inc.  
 PO Box 467  
 Baraboo, WI 53913

[www.saukcountyfair.com](http://www.saukcountyfair.com)      [info@saukcountyfair.com](mailto:info@saukcountyfair.com)

All information on the application, relevant to your event, must be completed  
 This application is used for all events, disregard items not applicable to your event.

Event venue preferred:

- |  |  |
|--|--|
| <input type="checkbox"/> Commercial Building     | <input type="checkbox"/> (JLP) John Litscher Pavilion-no kitchen   |
| <input type="checkbox"/> Grandstand Area         | <input type="checkbox"/> (JLP) John Litscher Pavilion with Kitchen |
| <input type="checkbox"/> Progress Hall           | <input type="checkbox"/> Horse Barn Building #19                   |
| <input type="checkbox"/> Badger Building         | <input type="checkbox"/> Hoop Barn (Livestock)                     |
| <input type="checkbox"/> Grandstand Area         | <input type="checkbox"/> Open Class Project Building               |
| <input type="checkbox"/> WCCU Livestock Pavilion | <input type="checkbox"/> McFarlanes' Rabbit & Poultry Bldg.        |

**Organization (s) or private person(s) renting (contract will be made in this name):**

\_\_\_\_\_

Is the Organization tax exempt?  If yes, we will need a copy of the tax-exempt form.

Event mailing address: \_\_\_\_\_

Event phone number \_\_\_\_\_ Cell: \_\_\_\_\_

Name of event: \_\_\_\_\_

Event Web site, if applicable: \_\_\_\_\_

**Event date request:** \_\_\_\_\_

Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Will you need to set up the day before the event?  Yes  No (time \_\_\_\_\_)

Will you need to break down the day after the event?  Yes  No

Projected event attendance: \_\_\_\_\_

Description of event

Check with an (X) all that apply, put N/A for items not applying:

Will your event be open to the public? (public events most have board approval)

I understand I am responsible for a city permit, if needed for public events.

Will you have subcontractors at your event?

Will you have food trailers at your event?

Will you have bouncy houses at your event?

Will you have motorized, or horse drawn wagon rides? \_

Will you sell alcohol? (**only class B, Fermented Malt Beverage can be sold, BEER**)

Will you give alcohol away? \_\_\_\_\_ No alcohol involved.

\_\_\_\_\_

\_\_\_\_\_ Will you Sell Food?

\_\_\_\_\_ Will you give food away?

\_\_\_\_\_ No food involved.

\_\_\_\_\_ Will you or subcontractors sell merchandise? \_\_\_\_\_ You \_\_\_\_\_ Subcontractors

\_\_\_\_\_ Will you have airborne objects at your event? **(must have city permit)**

\_\_\_\_\_ Will you have amplified music at your event? **(All city laws must be adhered to.)**

\_\_\_\_\_ Will you have a sound system at your event? **(All city laws must be adhered to.)**

\_\_\_\_\_ Will you have animals at your event? **(All Dept of Agriculture rules/laws must be adhered to.)**

**You will be responsible for manure removal by yourself or contracted entity,**

\_\_\_\_\_ Will you have portable toilets at your event?

\_\_\_\_\_ I understand that I am required to have event liability insurance listing the Sauk County Agricultural Society, Inc. as an additional insured on the certificate.

\_\_\_\_\_ I understand that any event with alcohol, subcontractors, bouncy houses, motorized, or horse drawn Rides will require liability insurance listing those or other specific items on event policy.

List any other plans not above, use additional sheet if needed, map etc:

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Parking and traffic plan (for public events):

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Any other important information we should know.

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Please, submit application to [info@saukcountyfair.com](mailto:info@saukcountyfair.com) or mail to Sauk County Agricultural Society, Inc. P.O Box 467, Baraboo, WI 53913, or call 608-356-8707.

Primary event contact: \_\_\_\_\_

Primary event contact email: \_\_\_\_\_

Secondary event contact name: \_\_\_\_\_

*You must provide a primary and secondary event contact for your event.*

Secondary event contact e-mail address: \_\_\_\_\_

Secondary contact mailing address: \_\_\_\_\_

Secondary contact phone number: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_  
Primary event contact signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secondary event contact signature

\_\_\_\_\_  
Date

Reminder: Please complete all information requested. Your application will not be considered if incomplete. Thank you! For questions you may contact us at [info@saukcountyfair.com](mailto:info@saukcountyfair.com) or by phone at 608-356-8707.