

Application for Selling Goods

For selling goods at any Hillsborough Athletic Fields

Town of Hillsborough, 27 School Street, Hillsborough NH 03244
Phone (603) 464-3877 / Fax (603) 464-4270 / Web www.hillsborough.nh.us

Name of Organization: _____

Non-Profit: _____ Yes _____ No (if non-profit, applicant must provide documentation or proof)

Contact Person: _____

Phone #: _____ Cell #: _____ E-mail address: _____

Mailing Address: _____

Schedule of use (specific dates and times must be stated): _____

List of items to be sold: _____

Insurance Certificate provided: _____ Yes _____ No

Waiver authorized by the Board of Selectmen per recommendation of the Town Administrator (if no Insurance Certificate available): _____ Yes _____ No _____ N/A

Written permission from the event included: _____ Yes _____ No

Applicant Signature: _____ Date: _____

Printed Name: _____

To be completed by the Town Administrator:

Application fee: \$ _____ or _____ Fee waived

Signature: _____