


**Certificate of Liability Insurance must be provided with the Town of Three Lakes listed as additionally insured for time of the event.**

<b>TOWN OF THREE LAKES</b> PO Box 565 6965 W School St Three Lakes, WI 54562 Phone: (715) 546-3316		APPLICATION FOR PERMIT TO HOLD A WINTER <u>EXHIBITION</u> <u>RACE</u> <u>EVENT</u> <i>(check all that apply)</i>
(1) Name of Event: _____  (2) Name and address of sponsoring organization: _____	(3) Location: _____ (4) Testing Date: _____ Event Date: _____ (5) Start Time: _____ Finish: _____	
(6) Description of event and/or courses NOTE: Attach a section of a chart or drawing showing boundaries		
(7) Estimated number of participating recreational vehicles: _____	(8) Number and description of recreational vehicles provided by sponsoring organization for safety and conduct of event: _____	
(9) Chair of the event committee: _____	(10) Location of Chair during the event: _____	(11) Means of communicating with Chair during the event: _____
(12) Name, address and telephone number of person to be contact for further details concerning the event: _____		
(13) The undersigned has full authority as spokesperson for the sponsoring organization: Signature _____ Date _____		
(14) Instructions: Attach a copy of your entry requirements and operations procedures.		

**PERMIT GRANTED**

Subject to the following requirements and/or conditions:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Town Chair

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Town Clerk