



Tent Rental Form

Date: _____

Member Organization: _____

Contact Name: _____

Mailing Address: _____

City _____, IN Zip Code: _____

Phone Number: (____) _____

E-mail: _____

Event Information

Name of Event: _____

Location: _____

Date and Time: _____ / _____

Description of Event: _____

Pick up Date: _____ Return Date: _____

Number of 10'x10' tents requested: _____

As a representative of this organization, I hereby agree that said organization will be financially responsible for any repair or replacement costs for the tents that are being loaned from the Tippecanoe Arts Federation. This cost will not exceed \$600 per tent.

Signature

Title if applicable

Please email this form to: info@tippecanoearts.org

For office use only: Approved by: _____

[] QB

[] Paid