



2024 INTERIM EVENT APPLICATION

Event Request Date(s): _____

Event Hour(s): _____

Type of Event: _____

Private or Public Event: _____

Event Set-up & Clean-up Date(s): _____

Event Set-up & Clean-up Hour(s): _____

Building(s) Requested: _____

Business/Organization Name: _____

Contact Name: _____

Mailing Address: _____

City, State, Zipcode: _____

Phone Number: _____

Email Address: _____

Website Address: _____

Expected Number of Attendees: _____

Is there a charge for the event? _____ If yes, please specify: _____

Have you held an event at the Southwest Washington Fairgrounds before? _____

If yes, when? _____

Does the event involve animals? If so, type: _____ How many: _____

Will there be displays outside of the building? If so, what will the displays be?

Any special needs: (i.e., electrical, water, showers, etc.)

Will you need Refuse Removal? _____ If yes, please specify: _____

Will alcohol be served at the event? _____



Which parking lot(s) will you be wanting to use? _____

*Green Gate Parking Lot requires a certified flagger which is paid at your expense.

Will you be charging for parking? _____ If yes, how much? _____

Will food concessions be required? _____ Hours needed: _____

If yes, please specify: _____

Will your event require camping? _____ If yes, please specify: _____

Description of Event:

Additional Information:

The Southwest Washington Fairgrounds reserves the right to withhold approval on the basis that the proposed activity would not be in harmony with or in the best interest of promoting and representing the Southwest Washington Fairgrounds. We agree to abide by the rules and regulations stipulated in the facility agreement should facility use be granted. We understand that the Southwest Washington Fairgrounds has the right to cancel any possible contracts or agreements if rules and regulations are not being followed.

Print Name: _____

Signature: _____ Date: _____

PLEASE RETURN THIS COMPLETED APPLICATION TO:

Southwest Washington Fairgrounds

1909 South Gold Street

Centralia WA, 98531

OR

swwfair@lewiscountywa.gov

Office Use Only:

Date of Application Received: _____

Approved or Denied Date _____ Applicate Emailed Date _____

Notes: _____
