

Demonstrators/Display Application Ashtabula County Covered Bridge Festival

Organization: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip _____ Phone: _____

Description of Demonstration or Display :

Electric Needed: ____ yes (\$5 fee) ____ no

Name of Insurance Company: _____

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For Office Use Only

Date Deposit Received: _____ Check # _____ Cash: ____ Amount \$ _____

Approved by: _____