

FAHA RENTAL INFORMATION*

Name: _____ Date(s) Requested: _____

Event: _____ Name of Organization: _____

START TIME: _____ END TIME: _____

Anticipated Number of Participants _____

Open to Public: Yes No

Sanctioned show Yes By: _____ No

Contact: _____ Telephone: _____

Email: _____

Facilities Requested: (i.e. large arena, small arena, administration building, museum barn, stalls, cross county area, trails, camping etc.)

Additional Information:

* For all rentals – a rental agreement is to be entered into and renter must provide its own insurance and name FAHA, the Foundation and Manor Twp. as additional insureds.