DATE: _____

P.O. Box 1094 Friday Harbor, WA 98250

Phone 360-378-4310 Fax 360-378-2075

info@sjcfair.org www.sjcfair.org



	www.sjciair.org	
ORGANIZATION:		
CONTACT NAME:		
ADDRESS:		
TELEPHONE:		-
EMAIL:		
NAME / TYPE OF EVENT:		
DATE(S) OF EVENT:		
NUMBER OF CHAIRS REQUESTED:		
NUMBER OF BENCHES REQUESTED:		
NUMBER OF TABLES REQUESTED:		
NUMBER OF STAGE/TENT REQUESTED:		
COST: \$1.00 Per chair, \$5.00 per bench, & \$8.00 p	per table. Ask about stage and tent rental	fees
P/U DATE: RETU	-	
Signature	(Print Name if different from contact)	
Signature constitutes agreement to the following	terms of rental:	
1. Renter agrees to take full responsibility for the damage or loss.	e benches. Full replacement value will be	charged for any
2. The renter agrees to hold San Juan County ar harmless from and against any and all losses, pe character in connection with or arising directly o	enalties, damages or other expense or lia	
FAIR USE ONLY		

M:\Fairground Events\1 - Building Event Rentals\2023 Equipment Rental Form.docx

Date:_

All benches/chairs/tents returned____