## ORGANIZERS REGISTRATION APPLICATION

**IMPORTANT**: TO AVOID SUSPENSION OF YOUR EVENT AND POSSIBLE COURT ACTION, YOU MUST REGISTER WITH THE HEALTH OFFICER **30 DAYS** BEFORE THE EVENT.

EVENT/FESTIVAL NAME:			
EVENT/FESTIVAL LOCATION:			
ORGANIZER NAME:			
ADDRESS:	CITY:	STATE:	ZIP:
PERSON IN CHARGE, PHONE, AND FA	X:		
THE FOLLOWIN	NG QUESTIONS MUST I	BE ANSWERED	
DATE AND TIME OF EVENT:			
NUMBER OF PEOPLE EXPECTED DAIL	_Y:		
NUMBER OF PEOPLE DURING PEAK T	WO HOUR PERIOD:		
HOW MANY EXISTING TOILETS ARE NONE: MEN:		VENT PATRONS T	O USE?
ORGANIZERS SHALL PROVIDE ADEQ CONTAINERS FOR THE EVENT	UATE TOILET, HAND W	ASHING, GARBAG	E, AND REFUSE
NUMBER OF FOOD AND BEVERAGE S	STANDS:		
PLEASE COMPLETE THE LIST ON THE RE	EVERSE SIDE OF THIS FOR	M, IDENTIFYING EA	ACH STAND,

STAND CONTACT PERSON AND CONTACT PHONE NUMBER. IF YOU USE A FORM THAT INCLUDES THIS

INFORMATION, YOU MAY ATTACH IT TO THE REGISTRATION APPLICATION.

Bartholomew County Code Title 11, Chapter 110, states no person may operate a retail food establishment without first obtaining a valid license from the health officer. Only persons who comply with the facility and operational requirements of the code shall be entitled to receive such a license.

NAME OF ESTABL	<u>ISHMENT</u>	CONTACT PERSON	PHONE NUMBER			
1)						
5)						
6)						
7)						
8)						
9)						
10)						
11)						
12)						
13)						
14)						
15)						
SIGNATURE:		DATE:				
FOR OFFICIAL USE ONLY						
APPROVED:						
TOILETS:	HAND SINKS:	VENDOR LIST	:			