TOWN OF CLINTON
CAR WASH EVENT REQUEST FORM

Date: _____________________

Name of Organization: ___________________________________

Contact Person: ________________________________________

Address: ______________________________________________

Date and Time of Event: _________________________________

Purpose:  _______________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

The Town of Clinton will supply the water. The water faucet is located on the east side of the Town Hall across from the Town Christmas tree. The contact person listed above will need to pick up a key (during regular office hours) to turn on and off the water before your event. The contact person is responsible for returning the key to the Selectmen's Office after the event. The organization is responsible to supply the necessary supplies i.e. soap, sponges, brushes, pails, paper towels, cleaners and a hose for the event.

The Town of Clinton is not responsible for any personal injury to any participant or any customer or for any property damage to any motor vehicle or equipment.

Signature: ___________________________________

Must be over 18 years of age and present on the Town of Clinton property during the Car Wash event.

Approved: ________________________________