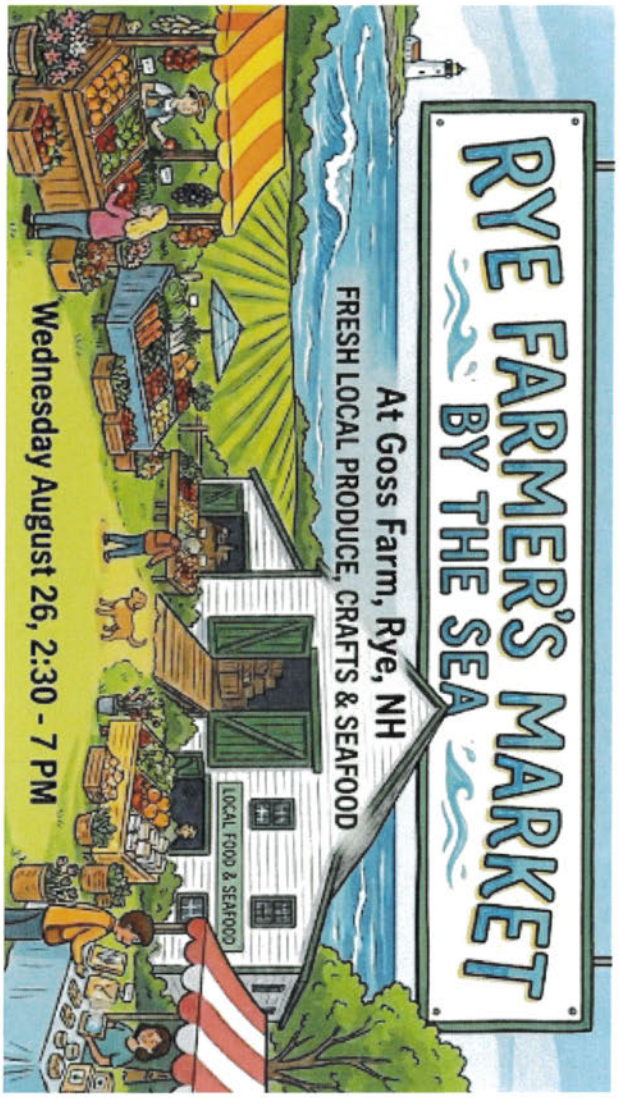
Consent
AGENDA ITEM: E.

DATE: 8/10/26



EVENT APPLICATION

APPLICANT INFORMATION

Date of Application: 8/7/26

Name of Organization: RYE CONSERVATION COMM Phone: (603)964-5525

Street Address: 10 CENTRAL RD. Fax: _____

City/Town: RYE Zip: 03870

Contact Person: JOE MARTILA Phone: [redacted]

Email address: jmartila@town.rye.nh.us

EVENT INFORMATION

Location: GOSS FARM

Date of Event: 8/26/26 Start Time: 2:30pm End Time: 7:00pm

Is this a fundraiser? ___Yes X No If yes, to benefit: _____

Detailed Description of Event: FARMER'S MARKET FOR PUBLIC PARTICIPATION

Please provide copies of anything to be distributed to the public

I certify that the above information is correct under penalty of RSA 641:3, Unsworn Falsification. I agree to hold harmless the Town of Rye, its employees, volunteers and agents of any/all injures and damages incurred during the course of the above mentioned fundraiser.

Print Name: HUGH T. LEE Signature: Hugh T. Lee

TOWN APPROVAL

Select Board: yes ____ no ____ Date: _____

Conditions/Details: _____