



## SPECIAL EVENT VENDOR AGREEMENT

Event: Ben Strong 5K Race/Fundraiser Date: March 24, 2018

Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

1. Indicate the services, in-kind donations and/or monetary contribution that your organization will be providing for/at the event:
2. Indicate an approximated total value for the above service(s)/contribution(s): \$ \_\_\_\_\_
3. Indicate any logistical requirements. Any equipment including, but not limited to, sound, lighting, generators, etc. that you intend to bring must be listed here and pre-approved by the event coordinators.

### Additional Terms & Conditions:

No tables, chairs, tents, electrical or other utilities or services will be provided. It is your responsibility to provide these items, as necessary. The organizers of this event will not be held responsible for any damage to or caused by such equipment. Further, the organizers have the right to refuse the use of such equipment if they feel it poses any safety or legal concerns.

#### AUTHORIZED REPRESENTATIVE

*(To be completed by individuals representing an Organization or Group)*

I, \_\_\_\_\_, warrant that I have authority to bind \_\_\_\_\_ to this Hold Harmless Agreement and by my signature hereon do so bind this individual/organization. By executing this waiver as an authorized representative, you are hereby binding all of your organization/group's individuals participating in this event to this waiver and hereby assume responsibility for these individuals.

The undersigned, being of lawful age, do hereby agree to indemnify and hold harmless Hometown Hope, Inc., its officers, employees, committee members, volunteers and agents, from and against any and all liability claims, damages, cost, loss of service, expenses and compensation for all negligence whether active or passive arising out of or in any way connected to related to the event named above.

Further, the individual/organization named herein agrees to the additional terms and conditions outlined above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\$25 non-refundable fee applies. Make checks payable to Hometown Hope, Inc. with Ben Strong 5k Vendor in the memo and mail to Hometown Hope, PO Box 560968, Rockledge, FL 32956**