

VENDOR APPLICATION

San Clemente Downtown Business Association

15th Annual San Clemente Car Show - SUNDAY, JUNE 13, 2010

Name _____	Business Name _____
Address _____	
City _____	State _____ Zip _____
Phone _____	Fax _____ E-mail _____
CA Resale # _____	City of San Clemente Business License # _____

VENDOR RATES

AMT. ENCLOSED

10 x 10 Vendor Space:

\$250.00

10 x 20 Vendor Space:

\$475.00

\$

Please check the appropriate category: Auto Related Food Other
Please specify your product: _____
Special Requests? _____

Return with check payable to: San Clemente Downtown Business Association
144 Avenida Del Mar, Suite R, San Clemente, CA 92672
EVENT IS RAIN OR SHINE Phone (949) 498-4538 Fax (949) 498-8452
NO RAIN DATES, NO REFUNDS www.info@villagesanclemente.org **10:00am-3:00pm**

VENDORS BE ADVISED!

- 1) Food vendors must be self contained and comply with all Orange County Health Department Code Requirements. Health Department Permits must be approved 30 days prior to event. No Electrical Power will be provided.
- 2) All vendors must have a valid City of San Clemente Business License.
- 3) All vendors must comply with the San Clemente City Resolution #04-27 which prohibits the use of any "styrofoam" containers.
- 4) Trash, food debris, food residue, and other waste must be removed at the conclusion of the event.
- 5) At no time shall waste or wastewater be allowed to enter the city's storm drain system which includes gutters and catch basins.

****Information regarding arrival time, directions and set-up instructions will be E-mailed prior to event****

WAIVER: I hereby give the San Clemente Downtown Business Association the right to use photographs taken of me or my activity, for reproduction in any medium for purpose of trade, advertising, display, exhibition or editorial use.

RELEASE OF LIABILITY: In consideration of acceptance of my entry in the above described event, I, intending to be legally bound, do hereby for myself, my heirs, my executors, and administrators, waive, release and forever discharge any and all rights and claims for damages which may hereafter accrue to me against the below listed agencies, companies or entities, their officials, employees, and agents of any and all liability or responsibility arising from any injury received or incurred by participating in the event. I promise to inspect the event site and insure that the area is safe and further agree that I will not participate in the event unless I am satisfied that the area and conditions are safe. I voluntarily assume all risks arising from conditions related to the event site by others or myself. Applicant further agrees to indemnify and to hold the following organizations, their employees and agents harmless from any liability arising out of the activity applied for: (a) City of San Clemente, (b) San Clemente Downtown Business Association, (c) Any and all sponsors associated with the event. I hereby acknowledge and accept the above conditions of participation and agree to assume full responsibility for the safety of myself, my equipment and any employees, and shall not permit potentially hazardous situations within or immediately adjacent to my assigned space. I further agree to hold harmless and release the San Clemente Downtown Business Association and their agents and the City of San Clemente from any and all liability therefore. I also acknowledge receipt of a copy of this signed application.

I understand that I must obtain my own insurance if I desire insurance coverage for the event, as the San Clemente Downtown Business Association or the city of San Clemente provides no insurance coverage to me.

Signature _____ Date _____

Please make a copy of this agreement and return original to the DBA office.