

Sonora's Spring Festival

Participants Application

The City of Sonora's Spring Festival will take place on
Saturday, April 29, 2017, from 11 a.m. to 4 p.m.

New participants must include a photo of your items for sale with the completed application.

This event will take place rain or shine. No refunds will be given.

Name: _____

Mailing Address: _____
(Full Address including Zip Code)

Phone # (_____) _____ or (_____) _____
(Day/Cell or Evening)

Email Address: _____

Summarize your Art/Craft or Item (s): _____

Will you be able to attend this event from 11 to 4? _____ If not what hours can you? _____

Please choose a location:

1. Linoberg Street, between Green and Washington St. _____ \$25.00 Fee
2. Linoberg Street, Between Washington and Stewart St. _____ \$25.00 Fee
3. Courthouse Park, locations are on Green and Jackson St. _____ \$50.00 Fee
4. Fountain Lot, across from the Opera Hall _____ \$25.00 Fee
5. Sidewalk along Washington Street \$10.00 _____

If you choose to be on the sidewalk what Store/business did you talk to? _____

Contact person for that business: _____

Do you have special requirements? (water for demos or power, etc.) If so what? _____

New vendors must provide photos.

Please mail your Application, Waiver, Photos & Fees to:

City of Sonora c/o Spring Festival

94 N. Washington St.

Sonora, CA 95370

Or Fax# 209-532-3511

Or email: swilkinson@sonoraca.com

If you have any questions please call Sheila Wilkinson at 209-532-7725.

Deadline to return completed applications will be Friday, April 7, 2017.

A Certificate and a Map with your location, will be mailed to you prior to the event.

**CITY OF SONORA
WAIVER FOR PARTICIPANTS**

I/We the undersigned, being of lawful age do hereby agree to indemnify and to hold harmless the City of Sonora, its officers, employees, elected officials and agents, from and against any and all liability claims, actions, causes of action, demands, rights, damages, cost, loss of service, expenses including but not limited to, Attorney's fees and Court costs, and compensation for all negligence whether active or passive arising out of or in any way connected or related to participation in the

_____ to be held on _____.
(Name of Event) *(Date)*

Name of sponsoring Individual(s) or Organization/Group

Address

Phone No. (include Area Code) Email Address

I understand by affixing my signature to this release that I assume all risks in connection with my participation in the event indicated above and waive the City's negligence.

Furthermore, the undersigned hereby acknowledges receipt of the _____ and willingness to adhere to its provisions.

<p>AUTHORIZED REPRESENTATIVE <i>(To be completed by individuals representing an Organization or Group)</i></p> <p>I, _____, warrant that I am authorized to execute this Waiver on behalf of <i>(Name of individual)</i></p> <p>the _____ and the Organization/Group's individuals participating in this event. <i>(Organization/Group)</i></p>

Signature Date

Signature Date

For Minors: (required for participants under the age of 18 at the time of the event)

This is to certify that I, as parent or legal guardian, have legal responsibility for this participant. I have read and understand this waiver and release and do consent and agree to join in this waiver, release and assumption of the risk, as provided above.

(Print Name of Parent/Legal Guardian)

Signature Date

This Waiver shall be binding on the heirs, successors and assigns of the participant(s).