TASTE OF SHAWNEE BOOTH CONTRACT

3-6 p.m., April 8, 2017

Contract ID

Name/Contact Person					
Company/Organization_					
Address					
City/State/Zip Code					
Day Phone	Evening Phone			Cell Phone_	
E-Mail					
All booth spaces are 10 ft. with gates opening at 12 N	•	s otherwise	noted. Set up w	vill be allowed	the day of the evo
TENTS: In the event of b	ad weather, car	nopy tents	will be available	e for a nomina	al charge.
TENT BOOTH VENDOR	R: Circle one:	YES	NO		
FOOD TRUCK VENDOR	R: Circle one:	YES	NO		
DOES YOUR BOOTH RI	EQUIRE ELEC	CTRICTY?	Circle One:	YES	NO

ELECTRICITY: Each Booth is entitled to one (1) 110v 15 amp plug (same as standard plug in home) within fifty feet of the booth location. It is the responsibility of the booth operator to provide an extension cord from the booth to the electricity. The connection is restricted to a single plug, with a maximum of 15 amps. You will be issued a tag with your booth number for your electrical cord.

THIS INFORMATION MUST BE COMPLETED:

You agree to abide by the Municipal Code of the City of Shawnee in regards to conduct on public property.

YES or NO

Do you have liability insurance which covers your participation in the Taste of Shawnee? (If so, attach a copy of your certificate of insurance)

YES or NO

If you do not have liability insurance, do you agree to indemnify the Taste of Shawnee Committee, the Rotary Club of Shawnee, Inc. and the City of Shawnee for any claim that may arise or may be made against the Rotary Club of Shawnee, Inc. and/or the City of Shawnee which arises out of any act or failure to act by you?

YES or NO

RELEASE

1,	(name of contact person)				
And,	(name of organization),				
and members of and from any and all claim or could have been raised by me, or which, Inc., upon or by reason of any action, event	and forever discharge the Rotary Club of Shawnee, Inc., its officers is, causes, damages, judgments and demands whatsoever, that were directly or indirectly may arise against the Rotary Club of Shawnee, which concerns or is related to the participation in the Taste of				
Shawnee event.					
Name of Organization	Signature of Person Authorized to Sign on Behalf of Organization				
RECEIVED AND APPROVED					
Rotary Club of Shawnee, Inc.					
By					
Title:					
Effective					

Please direct any questions or comments to tasteofshawnee@gmail.com. For more information, refer to our web site at www.tasteofshawnee.wix.com/2015.

Mail Contract to: Taste of Shawnee Committee in care of the:

Rotary Club of Shawnee, Inc., Doug Gibb, Treasurer, 8200 Acuff Lane, Lenexa, KS 66215.

Booth space is not reserved until the signed and completed booth contract is received.

THIS CONTRACT DOES NOT TAKE EFFECT UNTIL THE BOOTH CONTRACT IS RECEIVED AND EXECUTED BY THE TASTE OF SHAWNEE COMMITTEE FOR THE ROTARY CLUB OF SHAWNEE. YOU WILL RECEIVE A COPY OF THE SIGNED CONTACT BY MAIL NOTING YOUR BOOTH APPROVAL.