



SPECIAL EVENTS DIVISION

**ANNUAL FRIGHT NIGHT 2010
BOOTH RENTAL APPLICATION**

NAME OF ORGANIZATION: _____

CONTACT PERSON:

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

BOOTH (CIRCLE ONE) FOOD - \$30.00 per day /GAME-NOVELTY -\$ 25.00 per day

VENDOR IS RESPONSIBLE FOR MARICOPA COUNTY HEALTH PERMITS (YOU MUST OBTAIN MARICOPA COUNTY HEALTH 1 DAY PERMIT AND CALL PHONE (602 506-6978)

HOLDS HARMLESS / INDEMNITY AGREEMENT

I, the undersigned, intending to be legally bound, do hereby, for myself, my heirs, my personal representatives and assigns, waive, and release and forever discharge any and all rights and claims for damages which I may or may hereafter accrue to me against the TOWN OF GILA BEND, or any sponsor, it's or their officers, agents, representatives, successors and / or assigns or any other corporations or individuals associated with the TOWN OF GILA BEND for any and all damages, claims, injuries, or actions sustained or suffered in connection with this SPECIAL EVENT.

_____/_____
Official Agent of Vendor / **Date**

OFFICE USE ONLY

Form of payment: **CASH** **MONEY ORDER** **CHECK #** _____

Date: _____ **Authorized Town Staff Signature** _____