Fall Fest Saturday, September 21st 2019 10am – 4pm City Park VENDOR APPLICATION FORM

Items to be sold: (Please be specific a				
Vendor's Name:				
vendor savanie.	Busine	.ss Ivanic		
Address:				
Day of Event Phone #:	E-mail /	Address:		
Maryland Tax Number: (Required)		Do you demonstra	ate? Yes	No
Fee: \$25 for 10x10 space Payment \$50 for 10x20 Space	t Method: Cash	Check#		ast 4 Digits)
Tent? (NOT provided by City) Yes	No 10x10	20x10		
Additional Details:				
Please note electricity will not be prov Your application will be reviewed by payment until approval. If approval is	y a committee for	r final evaluation	. We will ho	ld onto your
Vendor participants will be require	d to sign a City o	f Hagerstown Hol	d Harmless	Agreement.
Please return the at	ttached hold harn ust be submitted l		<u>lication.</u>	
		<u>.</u>		
Signed: Vendors Name			Date	
Please return application form and hol			•	5, 2019.
Cassie He	ershberger, Recre 351 N Cleveland Hagerstown, MD	eation Assistant d Ave		
_ ,	OR COMMITTE US Oate received:		=======	=======
Table Number(s) Assigned:	Hold Harmles			

Approved: _	Date Approved:
	CITY OF HAGERSTOWN
	HOLD HARMLESS AGREEMENT
Lessee/User: Event/Use: Location: Date of Use:	
Hager allege in law Lesse furthe from a the us	essee/User agrees that it shall indemnify the City of Hagerstown and hold the City of stown harmless against any and all fines, suits, claims, demands, expenses, actions, losses, d losses, or liabilities of whatsoever nature or kind incurred either directly or indirectly either or equity, paid, suffered or incurred as a result of the acts, activities, or omissions of the e/User, its agents, servants, or employees, due to the operation and use of the premises. It is r agreed that the Lessee/User shall in addition to holding the City of Hagerstown harmless any and all liabilities or damage or injury to both persons and property, occurring as a result of e of said premises, shall defend The City of Hagerstown at Lessee's/User's expense against and all claims, suits, demands, of whatsoever nature or kind.
	Lessee/User
Witness:	By (Signature and Title)
Date:	Street
	City, State, Zip
	Telephone

Return to: The City of Hagerstown Cassie Hershberger, Recreation Assistant 351 N Cleveland Ave Hagerstown, MD 21740