

Proudly Invites You to Join a *Great Vendor Opportunity* at the annual



Saturday, October 19, 2019

11 am – 3 pm

Apperson Street Elementary School

10233 Woodward Ave, Sunland, CA 91040

Sell your products, advertise your business/services, and meet the families in your community!

General Cost is only \$25 early registration (before Oct. 5th) for your reserved space.

Registration after Oct. 4th will be \$40*

IMPORTANT INFORMATION:

Cash welcome/ Check made payable to Apperson PTA

Registration is \$25 until October 4, 2019. All vendors must be registered and have paperwork completed by Friday, Oct 11, 2019, including late registrants.

Please provide your own table(s), chair(s) and shade. Your reserved space is approximately 8' x 10' and located on the grass/blacktop of the main yard.

You must arrive between 9:00 am and 10:00 am to set up. You may be allowed to drive on campus to drop off items but will need to park outside the school. Anyone arriving after 10:00 am will not be allowed to drive on campus and will have to carry items in. You must pack up and be off campus by 4:00 pm.

For more information, please contact Jennifer Jones at (818) 293-5258

or email at jenn.jones.pta@gmail.com

APPERSON PTA FALL FESTIVAL 2019

REQUIRED VENDOR INFORMATION

Name:	Telephone number:	
Email:		
Best Contact Times (please circle one): Mornings	Afternoon Evenings	
Specific time:		
Company Name:	Your Title:	
Address:	City:	Zip code:
Please circle whether you are providing a SERVI	CE or PRODUCT	
Please provide a brief description of your service	or product:	
Please circle whether you are paying with CHEC	K or CASH	
If by check, please provide the check number:		
I understand I will provide my own table(s), chair insurance will not be provided by Apperson PTA a must provide my own liability insurance. I unders agreement on file with LAUSD and Apperson PTA.	and/or Apperson Street Ele tand that I must have a sigr	mentary School. I
Signature:		
Printed Name:		
Date:		

INDIVIDUAL STATEMENT OF UNDERSTANDING, RELEASE AND WAIVER OF LIABILITY

(For Use by Individual or Vendor Participant)

IMPORTANT – PLEASE READ BEFORE SIGNING

Name of Event:	Apperson PTA's Fall Festival	
Date(s) of Event:	October 19th, 2019	
School:	Apperson Street Elementary	

By signing below, I acknowledge my participation in the event is completely voluntary and at my own risk and I understand and agree to the following:

- I understand and agree that I will not be covered under any of LAUSD's liability or Workers" Compensation programs for any injury, death or damage incurred or caused as a result of my participation in the Event. I agree that I will be responsible (through business or personal insurance) for any and all expenses incurred as a result of personal injuries, death and/or property damage from my participation or the participation of my employees and or volunteers, if any, in this Event.
- I agree that I am completely responsible for all liabilities, damages and injuries I may cause to LAUSD property, its members and employees and all third parties [e.g., spectators, buyers, etc.] as the result of my participation in this Event including personal injuries, death or property damage caused by my activities, equipment, displays, vehicles, supplies and goods, or items sold or otherwise distributed or brought to the School.
- I FULLY AND FOREVER WAIVE AND RELEASE LAUSD, THE BOARD OF EDUCATION, ITS OFFICERS, EMPLOYEES AND AGENTS FROM ANY AND ALL RIGHTS, LIABILITY, CLAIMS, DAMAGES AND CAUSES OF ACTIONS OF ANY NATURE WHATSOEVER, KNOWN OR UNKNOWN, RELATING TO, ARISING OUT OF, OR OTHERWISE IN CONNECTION WITH THE EVENT.

SIGNED:	DATE:	, 20
PRINT NAME and TITLE:	ot to the terminend conditions of the p	olicy, canain policies maj