PARTICIPANT REGISTRATION FORM FOR

DUMONT DAY CELEBRATIONS

SATURDAY SEPTEMBER 10TH 2016

RAIN DATE SUNDAY SEPTEMBER 11TH 2016

NAME OF ORGANIZATION: _____

CONTACT PERSON:

NAME: _____

E-MAIL: _____

ADDRESS: _____

HOME PHONE NUMBER: _____

OFFICE PHONE NUMBER: _____

CELL PHONE NUMBER: _____

PLEASE LIST GAME, DISPLAY, ACTIVITY, FOOD OR ITEM FOR SALE:

_____

_____

_____

(2 TABLES AND 2 CHAIRS INCLUDED IN REGISTRATION EXTRAS NEEDED HAVE A NOMINAL FEE.)

DO YOU NEED ADDITIONAL TABLES OR CHAIRS? YES, OR NO IF SO HOW MANY?
TABLES_____ CHAIRS_____

DO YOU REQUIRE ELECTRICITY? YES, OR NO

**WHAT ITEM(S) WILL BE REQUIRING ELECTRICITY? _____

**WHAT ARE THESE ITEMS INDIVIDUAL WATTAGE REQUIREMENTS? _____

APPROPRIATE REGISTRATION FEE CHECK SHOULD BE MADE OUT TO DUMONT CELEBRATIONS

IF RESERVING A TENT, THERE IS A $50.00 RENTAL FEE CHECK MADE OUT TO DUMONT CELEBRATIONS

*********IN ORDER TO PARTICIPATE AT DUMONT DAY ALL ORGANIZATIONS AND CONTRACTED VENDORS MUST SUBMIT THE FOLLOWING DOCUMENTS BY AUGUST 15ST 2016:***

- HOLD HARMLESS FOR THE BOROUGH OF DUMONT

- CERTIFICATE OF INSURANCE NAMING THE BOROUGH AS AN ADDITIONAL INSURED
- RAFFLE LICENSES (IF APPLICABLE)

THANK YOU FOR YOUR PARTICIPATION

RETURN ALL PAPERWORK TO: DUMONT RECREATION OFFICE
LOCATED ON THE 3RD FOOR OF DUMONT BOROUGH HALL OR MAIL TO
DUMONT RECREATION
80 WEST MADISON AVENUE
DUMONT N.J. 07628
ATTN: DENISE WRIGHTINGTON

Any questions contact me
Denise Wrightington at dwrightington@dumontboro.org
Dumont Recreation Vice Chair / Celebrations Liaison

DUMONT DAY CELEBRATIONS - 2016

DATE: SATURDAY SEPTEMBER 10TH
RAIN DATE: SUNDAY SEPTEMBER 11TH

SET UP TIME: 8:00AM

EVENT TIME: 10:00AM-6:00PM

FOOD VENDORS ONLY: CAN STAY TIL 10:00PM (VENDORS CHOICE)

CONCERT TIME: 8:00PM

LOCATION: MEMORIAL PARK DUMONT N.J.

EVENT GUIDELINES:

BOOTH FEES:

NON-PROFIT ORGANIZATIONS:	WAIVED
BUSSINESS/CRAFTERS SELLING ACTIVITIES/WARES	$100.00
FOOD VENDORS	$150.00
BUSINESS PROMOTION ONLY	$25.00

BUSINESSES PROMOTING THEIR COMPANY IS ASKED TO HAVE A FREE ACTIVITY AT THEIR BOOTH. ALL BOOTH SPACES WILL BE APPROX. 10X15. EACH SPACE COMES WITH 2 SIX FOOT TABLES AND 2 CHAIRS. PARTICIPANTS MAY BRING THEIR OWN TENTS. THE TENTS MUST FIT WITHIN THE BOOTH SPACE.

All involved with the exception of those promoting their businesses only, will be able to charge for booth activities. Activities will be of a family friendly nature i.e. games, raffles, food, and rides etc. **No vendors or organizations will be able to sell candy cigarettes, toy guns, confetti, silly string, poppers or whips.** All activities will be approved by Celebrations according to the Borough guidelines. Returning organizations will have first choice on their previous year's activity and there will be no repeat activity or food allowed. This will allow each group and organization to fund raise equally.

Raffle licenses must be obtained through the borough and must be event specific.

STAGE:

Local dance, karate, bands choral groups, etc. will be invited to participate on the stage and given 15- to 30 minutes' time slots to work within. All other times slots will be filled through activities the local businesses have sponsored.

HOLD HARMLESS AGREEMENT
between the Borough of Dumont
and

Organization Name_____

Telephone Number_____

Organization Type (Individual, Partnership, Non-profit Corporation, Corporation, Public Entity_____

In consideration of the use of my organization's booth space at Memorial Park on the following dates; September 10, 2011 or the rain date of September 11, 2011 for the purpose of Dumont Day the undersigned agrees to defend, indemnify and hold the Borough of Dumont and its officers, agents and employees harmless from any and all liability, claims, costs and attorney's fees arising out of the use of the property referred to above.

I understand that this Hold Harmless Agreement also requires that the Borough of Dumont is indemnified from any losses or damages resulting from the acts or omissions from any guest, participant, visitor or other person attending the event herein referred to. Unless waived in writing by the Borough of Dumont. I agree to furnish a Certificate of Insurance specifically naming the Borough, of Dumont as an additional, insured providing general liability, bodily injury and property damage coverage with minimum limits of liability not less than $1/000,000 combined single limit.

Said certificate shall state that "the issuing company shall mail 30 days written notice to the certificate holder named, certified mail return receipt". It shall also contain a statement acknowledging this hold harmless agreement. No exceptions or limitations will be accepted.

In order to induce the Borough of Dumont to accept this hold harmless agreement, the following information concerning the intended use of the premises is furnished:

a. Alcoholic Beverages (will) or (will not) be served.

b. Total number of persons anticipated is _____.

c. Live entertainment (will) or (will not) be provided.

d. Other _____.

Signed this_____ day of _____ 20__ as the binding act in deed _____

_____

Authorized Signature from Organization listed above

Note: Certificate of Insurance shall be in original form.
No photocopies or fax copies shall be accepted. The authorized person must also sign it in ink.