

Christ *the* King Church
7th Annual Bazaar
Saturday, February 10, 2018
9:00 a.m. to 3:00 p.m.

NONPROFIT ARTS AND CRAFT VENDOR

BOOTH INFORMATION:

1. Booth fee of **\$75.00**.
2. Booth **space is 10' x 10'**.
3. Deadline to submit your forms are **January 5, 2018**.
4. Booths are assigned on a first-come/first-served basis.
5. Arts and Craft vendors are responsible for providing their own tables, chairs, and tent(s).
6. Arts and Craft vendors are encouraged to use “green practices” such as using biodegradable bags, etc.

INSURANCE REQUIREMENT:

All Arts and Craft vendors will be **REQUIRED** to meet the following insurance requirements:

1. **If you have an existing Commercial General Liability Insurance policy**, please provide a certificate of insurance which provides evidence of general liability coverage of not less than two million dollars (\$2,000,000) per occurrence to CHRIST THE KING CHURCH. Please have CHRIST THE KING CHURCH named as an “Additional Insured” on your general liability policy for **February 10, 2018**.
2. **If you do not have an existing policy**, please initial the check box (on the attached Hold Harmless/Indemnity Agreement) agreeing to protect, defend, hold harmless, and fully indemnify CHRIST THE KING CHURCH.

If you have questions regarding our Bazaar and its activities, please email us at bazaar@ctkchurchmaui.org. Mahalo nui loa.

Christ *the* King Church

7th Annual Bazaar

NONPROFIT ARTS AND CRAFT VENDOR APPLICATION FORM

Print, complete and submit all documents with payment to Christ the King Church, 7th Annual Bazaar Committee, 20 West Wakea Avenue, Kahului, HI 96732.

CONTACT INFORMATION:

Name:			
Contact Person:	Name:		
	Title:		
Mailing Address:			
City/State:			
Zip:			
Telephone:			
Fax:			
Website Address:			
Email Address:			
Signature and Title of Person Responsible for Application			Date

PRODUCT DESCRIPTION:

Describe the products you will be selling:	
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BOOTH FEE:

10' X 10' vendor area outside the parish hall	
Number of booths desired:	
Please make checks payable to CHRIST THE KING CHURCH . All returned checks will be subject to applicable bank charges.	

<i>Date and Time received:</i>	<i>For CTK Parish Use Only</i>
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HOLD HARMLESS /INDEMNITY AGREEMENT

PARISH: Christ the King Church, Kahului, Maui, Hawaii. "Parish" is understood to include the (Arch) Diocese of Honolulu.

VENDOR: _____

TYPE OF VENDOR: _____

DATES OF USE: Saturday, February 10, 2018

The above-named VENDOR agrees to defend, protect, indemnify, and hold harmless the above-named PARISH against and from all claims arising from the negligence or fault of the above-named VENDOR or any of its agents, family members, officers, volunteers, helpers, partners, organizational members, or associates in connection with the operations of the above-named VENDOR at the above-named PARISH.

Initial: _____ VENDOR agrees to provide a certificate of insurance to the PARISH, which provides evidence of general liability coverage of not less than two million dollars (\$2,000,000) per occurrence. VENDOR also agrees to have the PARISH named as an "Additional Insured" on its general liability policy for the DATES OF PARISH FESTIVAL in relationship to the VENDOR'S activities. It is agreed that VENDOR also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

OR

Initial: _____ VENDOR agrees to protect, defend, hold harmless, and fully indemnify the above-named PARISH for any claim or cause of action whatsoever which takes place during the above-identified DATE(S) OF USE that is brought against the PARISH by the above-named VENDOR or its employees, agents, guests, invitees, customers, partners, family members, organizational members, and associates, even if such claim arises from the alleged negligence of the PARISH, its employees or agents or the negligence of any other individual or organization not a party to this agreement. If any paragraph or sentence of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

SIGNED BY: _____
(Must be an official agent of VENDOR)

NAME AND TITLE: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

DATE: _____