

6th annual San Dimas High School PTSA Car Show

Open to all Makes and Models of vehicles Saturday, May 4, 2019 9:00 A.M. ~ 2:00 P.M. 800 W. Covina Blvd. San Dimas, CA 91773

VEHICLE REGISTRATION

Early bird registration through April 24 - \$25
Includes FREE T-SHIRT!
\$30 registration after April 24
Everyone receives a goody bag & a raffle ticket

VENDORS

Early bird registration through April 24 - **\$30**, \$35 after April 24 Must supply own table and chairs.

CHECK IN TIME: 8:00-9:00 A.M.
Cars can't be moved between 9AM-2PM
JUDGING BEGINS AT 10:30 A.M.
TROPHY PRESENTATION: 1:30P.M.
TROPHIES: Best in Show (will be in San Dimas Homecoming Parade in October)
Best: Antique, Classic Original, Cruising Car, Detailing, Engine, Interior, Modern, Project Car, Motorcycle, Muscle Car, Paint, Sports &Truck, Honorable
Mention, King of Cool Car, Special
Interest, Car Club Kings & Principal's Choice

<u>PROCEEDS BENEFIT:</u> TEACHER & DEPARTMENT GRANTS, SCHOOL GIFT, POSITIVE BEHAVIOR INTERVENTION PROGRAM, PTSA PROGRAMS, BUSING FOR STUDENT COLLEGE FAIR & SCHOLARSHIPS

FREE General Admission*Live ENTERTAINMENT*DJ * FOOD*VENDORS* COMMUNITY MEMBERS* RAFFLES All Day*

REGISTRATION FORM

Name:	Home/Cell/Business Phone:		
Email/Street Address:	City	Zip	
() Car () Truck () Motorcycle () other participant - <u>T</u> Cash/Check # (payable to San Dimas High So Show" link, then "PTSA Store" link) COPY OF AUTOMOBIL	chool PTSA) or PayPal at sandima	shigh.com (go to "PTSA/Car	
Vehicle: YearMake	Model		
Car Club (club with the most participants wins Car Club Kin	gs trophy):		
() Vendor Booth - <i>Name of Business & Items for sale</i> Amount \$ <i>Cash/Check</i> # (payable to S. "PTSA/Car Show" link, then "PTSA Store" link)			
() Sponsor/Community Member Name			

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Follow us on Twitter @SanDimasHSPTSA & Facebook @SDHSPTSA

No smoking on school property per Board Policy 3513.3

Mail form and payment to:

SDHS PTSA Car Show 800 W. Covina Blvd., San Dimas, CA 91773

Show Coordinator: Devon Goldsworthy Email: SanDimasHSCarShow@gmail.com Cell Phone: 909-214-4347

San Dimas High School Parent Teacher Student Association WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration for receiving permission to participate in the San Dimas H.S. PTSA Car Show, the car show Participant hereby releases, waives, discharges and covenants not to sue The CA STATE PTA -(SAN DIMAS H.S. PTSA), its agents, volunteers, officers, or Bonita Unified School District, its Board of Education, Employees, Agents, and Volunteers from any and all liability, claims, demands, actions and causes of action whatsoever arising our of or related to any loss, damage, or injury, including death, that may be sustained by the participant, or any of the property belonging to the Participant whether caused by the negligence of the Participant/Releaser, or otherwise, while participating in such activity, or while in, on or upon the premises where the activity is being conducted.

I am fully aware of the risks involved and hazards connected with the San Dimas H.S. PTSA Car Show and I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by me or any loss or damage to property owned by me, as a result of being engaged in such activity, whether caused by the negligence of Participant/Releaser or otherwise.

I further hereby agree to indemnify and hold harmless the San Dimas H.S. PTSA, its agents, volunteers, officers or the Bonita Unified School District, its Board of Education, Employees, Agents, and Volunteers from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, whether caused by negligence of Participant/Releaser or otherwise.

I understand that the San Dimas H.S. PTSA and the Bonita Unified School District does not provide any insurance coverage for participants for any circumstances arising from their participation in this event or any activity associated with or facilitating that participation. As such, I am aware that I should review my own insurance portfolio.

Date	Signature	

VENDOR/CONCESSIONAIRES/SERVICES PROVIDERS HOLD HARMLESS AGREEMENT

Insurance Requirements:

email at CAPTA@BBandT.com.

- a) Worker's Compensation Insurance: Required if you have employees engaged in the performance of work under the agreement.
- b) Comprehensive General Liability: Required \$1,000,000 Combined Single Limit. This policy shall cover, among other risks, the contractual liability assumed by vendor/concessionaire/service provider under the indemnification provision set for in the agreement, and includes Bodily Injury, Property Damage, Personal Injury and Products Liability if applicable.
- c) Automobile Liability Insurance: Food Truck at a PTA event. \$5,000,000 limit required.

If you (vendor/concessionaire/service provider) fall under (b) or (c), a Certificate of Insurance showing policy limits and an endorsement to the policy MUST be submitted with your contract.

Endorsement containing the following language MUST be added to the above policies (b) and (c) as an Additional Insured:

The California Congress of Parents, Teachers, and Students, Inc. (California State PTA), including all unit, council and district PTA's and all their officers, directors, members and volunteers and the Bonita Unified School District, its Board of Education, Employees, Agents and Volunteers. The insurance afforded by this policy shall be primary insurance to any other valid and collectible insurance available to PTA and

		(Name of vendor/concessionaire provider)
/We		
vendor/concessionaire/service provider) agree(s) to de and Students, Inc. (California State PTA), including all and the Bonita Unified School District, its Board of Ed njury", "property damage" or "personal and advertisin hose acting on my/our behalf: A. In the performance of my/our ongoing opera. B. In the sale or distribution of my/our product. C. In connection with my/our premises rented. NOTE: The terms and conditions of this agreement is unit, council, district or State PTA in California.	I unit, council and district PTAs and all of their lucation, Employees, Agents and Volunteers wing injury" to the extent caused by my/our acts of ations; or ts; or to you.	officers, directors, members and volunteers th respect to my/our liability for "bodily r omissions or for the acts or omissions of
SIGNED:	PRINT NAME:	
NAME OF ENTITY:		
Vendor: If you wish to be included as an approved	I vendor on the PTA Insurance website then	contact our broker at (818) 662-4200 or

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