



4th Annual San Dimas High School PTSA Car Show

OPEN TO ALL MAKES AND MODELS OF VEHICLES

Saturday, May 6, 2017

9:00 A.M. - 2:00 P.M.

800 W. Covina Blvd, San Dimas, CA 91773

VEHICLE REGISTRATION

Early bird registration through April 28 - **\$20**

Includes *FREE T-SHIRT!*

\$25 registration after April 28

Everyone receives a goody bag

VENDORS

Early bird registration through April 28 - **\$30**,

\$35 after April 28

Must supply own EZ UP, tables 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.

Best in Show (will be in San Dimas Homecoming Parade in October)

Best: Antique, Classic Original,

Cruising Car, Detailing, Engine,

Honorable Mention, Interior,

Modern, Project Car, Motorcycle,

Muscle Car, Paint, Sports & Truck

King of Cool Car, & Car Club Kings

PROCEEDS BENEFIT: TEACHER & DEPARTMENT GRANTS, SCHOOL GIFT, POSITIVE BEHAVIOR INTERVENTION PROGRAM, PTSA PROGRAMS, & SCHOLARSHIPS

*FREE General Admission*Live ENTERTAINMENT*DJ *FOOD*VENDORS**

COMMUNITY MEMBERS RAFFLES All Day*E-WASTE Event**

BICYCLE DECORATING CONTEST & PARADE for Elementary School Students

REGISTRATION FORM

Name: _____ Home/Cell/Business Phone: _____

Email/Street Address: _____ City _____ Zip _____

() Car () Truck () Motorcycle () other - *T-Shirt Size* for early bird vehicle participants _____ Amount \$ _____

Cash/Check # _____ (payable to San Dimas High School PTSA) or PayPal at sandimashigh.com (go to "PTSA/Car Show" link, then "PTSA Store" link) COPY OF AUTOMOBILE INSURANCE REQUIRED FOR CAR SHOW PARTICIPANTS

Vehicle: Year _____ Make _____ Model _____

List Trophy Category/Categories you would like to be judged in: _____

Car Club (club with the most participants wins Car Club Kings trophy): _____

() Vendor Booth - Name of Business & Items for sale _____

Amount \$ _____ Cash/Check # _____ (payable to San Dimas High School PTSA) or PayPal at sandimashigh.com (go to "PTSA/Car Show" link, then "PTSA Store" link)

() Community Member Name _____

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
VEHICLE HOLD HARMLESS AGREEMENT

I hereby request to participate in the following Event: San Dimas High School PTSA Car Show, May 6, 2017. As a condition of my participation in this event, I acknowledge that San Dimas High School PTSA and Bonita Unified School District, ("Released Parties") do not provide any type of insurance including liability, property, auto, or medical coverage for participants for any death, bodily injury, personal injury, illness, or any loss to property sustained during my course as a participant.

I understand that my participation in this event will require that I drive. I understand that driving carries significant risk of personal injury and or potential harm to others. I know that there are natural and man-made hazards, environmental conditions, and risks, which in combination with my actions, can cause me serious or possibly even fatal injury. I agree that as a participant I must take an active role in understanding and accepting these risks, conditions, and hazards. I agree that I alone, not the Released Parties, am responsible for my safety, as well as for the safety of any others I may be driving.

In consideration for participating in this event, I hereby personally assume all risks in connection with driving during and participating in this event, as well as any injury or damage that may befall others with me, including all risks connected therewith, whether foreseen or unforeseen. I further release, exempt, hold harmless, and Released Parties from any claim or lawsuit by me, my family, estate, heirs, or assigns, arising out of my participation in this event.

On behalf of myself, as well my heirs, executors, administrators and assigns, I hereby forever release, discharge, waive and agree to indemnify and hold harmless, the Released Parties along with their respective officers, directors, agents, employees, contractors, volunteers, successors and assigns from and against any and all claims, demands, causes of action, obligations, liabilities, suits, losses, damages, costs, expenses, and fees, including without limitation, court costs and attorney's fees, of any and every nature of character, including without limitation, for death, personal injury and/or loss of property, except when caused by the sole active negligence, gross negligence, or willful misconduct of the Released Parties, arising out of or connected in any way with my participation in the Event.

I hereby grant the Released Parties full and complete permission to use my name and likeness, including any photographs, video graph and interview footage and quotations from me obtained in connection with the Event in legitimate promotions of the Event and to further the mission and vision of the Event in any and all media now known or hereinafter developed without restriction or compensation.

I understand that I have given up substantial rights by signing this Waiver and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and I INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITINAL RELEASE of all liability of Released Parties to the greatest extent allowed by law.

Print Name

Signature

Date

VENDOR/CONCESSIONAIRES/SERVICES PROVIDERS HOLD HARMLESS AGREEMENT

Insurance Requirements:

- 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)

I/We _____

(vendor/concessionaire/service provider) agree(s) to defend and to indemnify and hold harmless, the California Congress of Parents, Teachers, and Students, Inc. (California State PTA), including all unit, council and district PTAs and all of their officers, directors, members and volunteers and the Bonita Unified School District, its Board of Education, Employees, Agents and Volunteers with respect to my/our liability for “bodily injury”, “property damage” or “personal and advertising injury” to the extent caused by my/our acts or omissions or for the acts or omissions of those acting on my/our behalf:

- A. In the performance of my/our ongoing operations; or
- B. In the sale or distribution of my/our products; or
- C. In connection with my/our premises rented to you.

NOTE: The terms and conditions of this agreement shall apply with respect to Vendor’s/Concessionaire’s/Service Provider’s operations for any unit, council, district or State PTA in California.

SIGNED: _____ PRINT NAME: _____

NAME OF ENTITY: _____ TITLE: _____ DATE: _____

Vendor: If you wish to be included as an approved vendor on the PTA Insurance website then contact our broker at (818) 662-4200 or email at CAPTA@BBandT.com.