

## DOWNTOWN SANTA MONICA SAMPLING APPLICATION

Please complete this form and return it to Downtown Santa Monica Inc. by fax to 310.458.3921 or e-mail to Events@DowntownSM.com

PRODUCT NAME					
EVENT PRODUCER					
Main Contact		_Additional C	Contact(s)		
Address					
Office Phone					
E-mail		_Cell Phone _			
Sampling date & time					
Day of the Week	Date		Time	to	
Will you be giving away pro	· · · · · · · · · · · · · · · · · · ·	□N	o		
Will the item be wrapped?	☐ Yes ☐ No				
Will you be cooking or giv Please describe:			□No		
* Note: Additional permit	s maybe required				
Trash pick-up plan:					

Will the event be photograph If yes, what equipment will b	13	?	
List any partners associated v	with this event:		
Provide details of the media	you are using to prom	ote or advertise your sampling:	
☐ E-mail campaign	☐ Web posting	Other Internet campaign	Radio
Television	Print	☐ Publicity	Other
How many people are you exp	ecting to draw to this	sampling?	
Please provide any advertising	or press materials to	marketing@downtownsm.com as the	ey become available.
•	Insurance in the amo	d Harmless Agreement and supply Dunt of \$1,000,000 stating the City additional insured.	
ACCEPTANCE			
knowledgeably and truthfully	. I understand that m	vithin this document. I have answe y organization may need to furnish a 's request in order to complete the S	additional documents
Signature			
Print Name		Title	
Company Name			

## Indemnification & Hold Harmless Agreement



NAME:	
ADDRESS:	
PHONE:	
EMAIL:	
hereinafter known as "Indemnitor," in consideration of:	
DESCRIPTION OF WORK:	
DATE:	
HOURS:	
LOCATION:	
agrees to the following terms and conditions	
Indemnitor shall defend, indemnify, and hold harmless Downtown Santa Monica, Inc., board, officer director, staff, property owners, merchants and vendors, the City of Santa Monica, members of its Counciling to Counciling	eil, rit rs, be
IN WITNESS WHEREOF, this Agreement is executed on the day of, 2016.	
INDEMNITOR:	
By	