



LODI DISTRICT CHAMBER OF COMMERCE STREET FAIRE

Sunday, October 1, 2017, 8 a.m. – 4 p.m.
Golf Cart Sponsorship Agreement

Priority will be given to sponsors who submit their applications and payment on or before September 1, 2017.

Business Name: _____

Contact Person: _____

Mailing Address: _____

Daytime Phone: _____ Cell: _____

Email Address: _____

Information for Golf Cart Sponsors:

- Sponsors need to provide two (2) signs for your sponsored golf cart.
- The signs can be metal or corta-plastic with riveted holes so they can be attached to your cart.
- The signs are to be within 2’x18” to 2’x2’ in size.
- The sign must be delivered to the Chamber office at least ten (10) days before the event.
- Pamphlets, literature or other items cannot be distributed from the golf carts. However, there are available booths which can be secured to distribute such items.
- Drivers must maintain full control of the golf cart at all times. Reckless behavior will not be tolerated.
- Drivers cannot be under the influence of alcohol or mind altering drugs.
- Drivers and/or passengers are not allowed to consume mind altering drugs or alcohol in or about the golf cart.
- The Chamber or its agent(s) may revoke the use of a golf cart for any of the above violations without additional notice and there will be no refund.
- The Chamber has a list of printers and sign companies if you need.

Will you be providing a driver? Yes No, please provide a driver for me.

If yes; Name: _____ DL#: _____ State: _____

Name: _____ DL#: _____ State: _____

Hours driving: 8:00 – 10:00 am 10:00 am – 12:00 pm 12:00 – 2:00 pm 2:00 – 4:00 pm
 Entire day Other (please specify): _____

FOR OFFICE USE ONLY

Amount Received \$ _____ Cash Check Credit Card Date: _____

Staff Member: _____

Sponsorships Cost:

- Chamber Member: \$225 (10% Discount)
- Non-Chamber Member: \$250
- Both Street Faires (same year): \$460 (8% Discount)

NOTE: NO refunds after September 1, 2017
NO refunds due to non-participation or weather.

There will be a \$35.00 charge on all returned checks.

LIABILITY CLAUSE: *The participants expressly agree to indemnify, defend and hold the Lodi District Chamber of Commerce, its officers, agents, servants and employees, harmless from any and all claims for loss, damage, injury or liability of whatsoever nature and howsoever the may be caused or may arise resulting directly or indirectly from their participation in this event.*

SIGNATURES OF VENDORS SELLING OR DISPLAYING ARE REQUIRED

Contact: _____ Date: _____

Driver: _____ Date: _____

Driver: _____ Date: _____

After completion of both pages, please return them to: (Please note: ALL fields are required):
Lodi District Chamber of Commerce, 35 S. School Street, Lodi, CA 95240 ~ Business: (209) 367-7840, extension 110 ~ Facsimile: (209) 369-9344

Credit Card (Master Card or Visa only) _____ Expiration Date _____

CSV code _____