



5th Annual San Dimas High School PTSA Car Show

OPEN TO ALL MAKES AND MODELS OF VEHICLES

Saturday, May 5, 2018

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

800 W. Covina Blvd, San Dimas, CA 91773

VEHICLE REGISTRATION

Early bird registration through April 28 - \$25

Includes *FREE T-SHIRT!*

\$30 registration after April 26

Everyone receives a goody bag & a raffle ticket

VENDORS

Early bird registration through April 28 - \$30,

\$35 after April 26

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

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 ****

REGISTRATION FORM

Name: _____ Home/Cell/Business Phone: _____

Email/Street Address: _____ City _____ Zip _____

() Car () Truck () Motorcycle () other participant - T-Shirt Size (circle) S M L XL 2X 3X 4X 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)

() **Sponsor/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
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 out 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:

- 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.