



Taste of the Bay

July 14, 2014 6:00 – 9:00p

Booth Application

Applicant Information

Business Name _____ Contact Person _____

Address: _____
Street Address

_____ City _____ State ZIP Code _____

Phone: () _____ Email: _____

Web Address: _____

8 x 8 Booth space. Electricity? _____ Please define the amount of electrical usage as Light, Medium or High

Description of food you will be serving: _____

Applications can be emailed to dsmchamber@att.net (228) 392-2293

Assumption of Risk and Indemnity Agreement

I, (we) the _____ as part of _____ In consideration for renting, leasing or otherwise using the facility, agree to assume full responsibility and liability for and all risk if loss by theft, vandalism, destruction, or otherwise, of any and all items of personal property belonging to the owner/business thereof while in and about said facility, regardless of whether or not said loss relates to, or arises out of the use of said facility and, in addition, said owner/business agrees to indemnify and hold the D'Iberville/St. Martin Area Chamber of Commerce, City of D'Iberville, and Harrison County its agents and servants, and employees harmless from and against all claims and expenses for same, including attorney fees.

Signature _____ Date _____