2023 Napa Dia de los Muertos Altar Application

Name:			
Phone:			
E-mail:			
Address:	**City:**		**Zip:**
Website:		**Social Media Links:**	
Have you displayed an Altar before?	**Y __ N ___**	**If yes, locations:**	
DAY OF THE EVENT INFORMATION			
Contact Name:		**Cell:**	
	Please describe the altar you are proposing. Please include proposed dimensions **Describe other equipment and displays you will be providing:**		

I understand that the City of Napa, Parks & Recreation is not responsible for lost, stolen and/or damaged property or equipment, nor accident and/or injury to me, my staff or persons that I may have in my booth, and shall defend, indemnify and hold harmless any of the above-mentioned individuals and organizations. By signing below I agree that I have read and understand the terms of this exhibitor agreement and will comply at all times. I also understand that until I am notified that my application has been approved, I am not a confirmed exhibitor for this event.

Signature _____ **Date** _____