

2019 Classic Car Cruise In Event Date: Saturday August 10, 2019 Rain Date: Sunday, August 11, 2019 Anticipated Attendees: 300+

2019 SCHEDULE:

Saturday, August 10, 2019

Set-up Vendors Open Clean-up 9:00am 10:00am – 3:00pm 3:00pm – 4:00pm

VENUE:

Prices Corner Shopping Center

- This is an outdoor event.
- Vendors must provide their own table(s), chair(s), and tent. Vendors will be located along the perimeter of the event.

VENDOR SPACE RENTAL FEE:

Space for one (1) standard 8' table / \$**50** Tent Setup – 10x10 / \$75 Display Trailer/Double Tent – 15x10 / \$100

Reservations are filled on a first come, first served basis. Reservations must be submitted no later July 26, 2019.

Your space is not reserved until the following is completed:

- 1. Full payment of the space rental fee to CSCDE.
- 2. Completed copy of the "Classic Car Cruise In Vendor Contract" is submitted to Amanda Tomasetti

For more information or to submit the Summer Slam for Cancer Vendor Contract, contact:

Amanda Tomasetti, Director of Development Cancer Support Community Delaware 4810 Lancaster Pike Wilmington, DE 19807 (302) 995-2850 / atomasetti@cscde.org

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Event Date: Saturday, August 10, 2019

AGREEMENT BETWEEN CANCER SUPPORT COMMUNITY DELAWARE, CLASSIC CAR CRUISE IN AND

(Business/Vendor Name)

Cancer Support Community Delaware (CSCDE) will present the 2019 Classic Car Cruise In fundraiser on Saturday, August 10, 2019 (Rain Date: Saturday, August 11, 2019)

- 1. CSCDE agrees to furnish to Exhibitor, and Exhibitor hereby reserves ______ space(s) at \$_____ per space for the display and sale of Exhibitor's merchandise during the Classic Car Cruise In.
- 2. Exhibitor agrees to pay CSCDE the total sum of ______ as rental for the space(s) reserved. The Exhibitor shall, at or before the signing of this agreement, pay to CSCDE the total space rental fee.
- 3. CSCDE assumes no responsibility for the collection of accounts from customers of Exhibitors.
- 4. Exhibitor also agrees:
 - (a) To assume all risk of loss (by theft or otherwise), damage, or injury to Exhibitor's merchandise and representatives.
 - (b) To pay all expenses of transportation, packing and unpacking of Exhibitor's merchandise.
 - (c) To complete the arrangement of Exhibitors display by not later than 9:45am on Saturday, August 10, 2019, and to open the display at 10:00am. All merchandise and equipment shall remain in place until 3:00pm on Saturday, August 10, 2019 and must be removed no more than 1 hour after closing of the event.
 - (d) <u>To fill all orders by September 10, 2019</u>, unless otherwise arranged with customer and to notify such customer immediately if delivery dates cannot be met.
 - (e) To save harmless CSCDE and its representatives from any claims or liability for injury, loss or damage resulting from Exhibitor's acts or participation hereunder.
- 5. This agreement may be cancelled by either party hereto by providing written notice of cancellation to the other party electronically on or before July 26, 2019. Written acknowledgement of the cancellation notice must be made by the other party for the cancellation to be binding. All rental fees are non-refundable and are considered a donation to CSCDE. The donation is tax-deductible to the fullest extent allowable by law.
- 6. This agreement shall become binding, and the aforesaid space(s) shall be reserved for Exhibitor upon;
 - (a) the execution of this Agreement on behalf of CSCDR and Exhibitor; and

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(b) the receipt by CSCDE of the total space rental fee from Exhibitor.

2019 CLASSIC CAR CRUISE IN	
EXHIBITOR	

CANCER SUPPORT COMMUNITY DELAWARE

Amanda Tomasetti, Director of Development

By: _____ Authorized Representative – Please Print

Mailing Address

City, State, Zip Code

By:_____

Space Rental Amount Date Received

Telephone Number

E-mail Address

Name of company as you wish it to appear in printed materials

Signature				Date
Payment Information	n:			
Payment Method:	Check	MasterCard	🗌 Visa	Amex
Credit Card Number				
Exp. Date:// _ Signature:				

Make checks payable to Cancer Support Community Delaware. Your donation is tax-deductible to the fullest extent allowed by law. Tax ID # 51-0351863

Please include a brief description of your product(s):

□ Please provide me with a copy of this executed contract.

□ It is not necessary to provide me with a copy of this executed contract.

Thank you for your support! www.cancersupportdelaware.org