



CULTURAL Palooza!

Entertainer Application

Saturday, March 21, 2020

4:00-9:00 p.m.

(All applications are subject to approval.)

Chino City Hall • 13220 Central Avenue • Chino, CA 91710

Contact: Kari Franco • 909.334.3537 • kfranco@cityofchino.org • Fax 909.334.3717

Representative's Name: _____ Phone #: _____

Name of Organization/Group: _____

Address: _____ City: _____ Zip: _____

E-mail Address: _____

The City of Chino is seeking groups to participate in the event to showcase their cultural traditions through dance, music, entertainment, or other activity that will demonstrate cultural traditions. The City of Chino greatly appreciates your decision to participate in this event.

Entertainer Information:

- Opportunity to perform during event:
 - Time/duration to be determined upon approval.
 - Must provide any props/music needed for performance. PA system provided (3 microphones max).
- Promotional Information can be displayed at Outreach Booth.

Please describe entertainment to be provided at the event and how much time will be needed:

Please provide a brief introduction/biography about your entry/organization. (Max: 50 words):

Application Information:

Submit To: Email: kfranco@cityofchino.org Fax: 909.334.3717
 Delivery/mail: Carolyn Owens Community Center • 13201 Central Avenue • Chino, CA 91710
 Attn: Kari Franco, Community Services Coordinator

Submit By: Friday, February 14, 2020 (or until full)
 *Application approval may take up to five (5) business days to review/process.

Date Received: Staff's Initial:

Staff Use Only:

Approved Denied Signature: _____ Date: _____

*** WAIVER AND RELEASE BY APPLICANT(S)
FOR PARTICIPATION IN A CITY OF CHINO SPONSORED PROGRAM AND/OR
USE OF A CITY OF CHINO FACILITY**

Participant Name: _____ Activity: Cultural Palooza

Program Dates: From: March 21, 2020 To: March 21, 2020

In exchange for being permitted to participate in any City of Chino activity and/or use any City of Chino facility, I acknowledge and attest to the fact that:

1. My participation, and/or that of my child/children/guardians, is voluntary.
2. My participation, and/or that of my child/children/guardians, may result in injury, death, property damage, and other losses, and I assume all of those risks.
3. I am legally competent to understand and accept the associated risks.
4. I waive, and release the City, its officials, employees, and volunteers from, all claims for any injury, death, property damage, or other loss resulting from my participation in the activity, and/or that of my child/children/guardians.
5. I am responsible for payment of all fees for, and liabilities and damages resulting from, my participation in the activity and/or that of my child/children/guardians, including damages to City property, injury to other participants, or other losses of any kind.
6. I will defend the City and its representatives against any claims or lawsuits that are a result of my willful misconduct, and/or that of my child/children/guardians.
7. I agree that the City can take photographs and/or film me, and my child/children/guardians, while participating in a City activity and/or at a City facility to be used for promotional purposes; and, further that such photographs and film will be the sole property of the City and that neither I nor my child/children/guardians will be entitled to any license fee or royalty for the City's use thereof.
8. I understand that rates, fees, dates, times, classes, schedule of classes, and instructors established by the City may change at any time without notice.
9. I agree that City fliers and class schedules are not an expressed and implied contract.
10. I agree that the City is not responsible for any damage or loss that may arise from a misunderstanding, error, or omission related to the activity.
11. I understand that the City reserves the right to change or cancel any or all of the participation/use of rules at any time.
12. I understand that any individual behaving inappropriately or unsafely will be ejected and denied future participation.

I am signing a full release of any and all liability against the City of Chino and do so of my own free will.

Printed Name: _____ Parent/Guardian

Signature: _____ Date: _____

Address: _____

Phone (day): _____ Phone (evening): _____ Phone (cell): _____

Organization (if any): _____

***** **FOR OFFICE USE ONLY** *****

Staff member printed name: _____ Title: _____

Staff member signature: _____ Date: _____

*** To be completed by each adult (18 years of age or older)**