

INDEMNITY AND HOLD HARMLESS AGREEMENT

DATE:

DESCRIPTION OF ACTIVITY: **DISPLAY AND SALE OF GOODS AT GHIMF**

The undersigned requests and is granted to make use of the Greater Hartford Irish Music Festival “GHIMF” grounds located at the Irish American Home Society, Inc. (“IAHS”) for the intended purpose described above. In consideration of “permissive entry” to the facility, the undersigned, and any of the agents servants and employees of the same, do hereby for themselves and their personal representatives, heirs and assigns, do hereby;

1. Agree to indemnify, defend and hold harmless the GHIMF and IAHS from any and all claims that arise from any and all claims and liability arising out of or in connection with any claims for personal injury, death or property damages caused or claimed to be caused by the use of the premises, arising out of the conduct of the GHIMS or IAHS, any other vendor upon the premises, that may occur at any time during the event or relating to the right to enter upon the grounds of the IAHS for the described activity.
2. Agree that the GHMF or the IAHS shall in no way be responsible for any issues relating to security or the vendor having goods or services upon the Premises, and that any loss from theft, storm or Act of God shall be the sole responsibility of the Vendor and not of the event organizer.
3. Shall name the GHIMF and/or the IAHS as an additional insured or provide to the event organizer a certificate of insurance providing sufficient property and liability insurance to cover all losses or damages relating to the described activity.
4. Acknowledge that the undersigned is/are aware of equipment and safety regulations and will comply with regulation assuming all risk for themselves and all liability to others for failure to do so. No oral representatives or inducements have been made to obtain signatures on this agreement. If any portion of this agreement is held invalid, it is agreed that balance thereof, shall continue in full legal force and effect.

I have read this document and understand that it is a release of all claims. I understand that I

First and Last Name (Please Print)

Date

Company Name & Address

Signature

Date