

ONEHOPE



**SATURDAY
APRIL 20, 2019**

**Tecolote Shores -
Mission Bay Park
1300 E. Mission Bay Dr.
San Diego, CA 92109**

EVENT SCHEDULE

VENDOR LOAD-IN

Friday 4/19: 3:00 - 5:00 pm
Saturday 4/20: 5:30 - 6:30 am

FAMILY FESTIVAL & EXPO:

7:00 - 11:00 am

RACES

10k Run/Walk: 7:30 am
5k Run/Walk: 8:00 am
1 Mile Fun Run: 9:15 am

CONTACT

For more information or any questions contact Matt Sills at Matt@act-today.org or 949-444-2365

OFFICE USE ONLY

Received by Event Director _____
Received by Office: _____
Payment Received: _____
Booth Number: _____

2019 VENDOR APPLICATION FORM

Join us as a vendor/exhibitor at the 9th Annual **ONEHOPE** Autism Care Today for Military Families 5k/10k & Family Festival on Saturday, April 20, 2019.

Our finish-line festival features an expo/resource fair with 40 vendors, live music, beer and wine tent, kids' zone and more! Past events have drawn over 1,700 attendees from all over the country. Since our inaugural event in 2011, we have raised almost \$800,000 to benefit military families impacted by autism.

The 2019 vendor package is \$275 (\$175 for non-profit organizations) and includes (1) 10x10 booth space, (1) 6' table and (2) chairs. All vendors must supply or rent a 10x10 pop-up/canopy.

NOTE: Any exhibitor sampling or selling food/drink (any consumable) must file a Temporary Food Facility Permit (TFF) through the County of San Diego Environmental Health for an additional fee.

- \$275** (Must be received by 3/31/19, or before sell-out)
 \$175 for Non-Profit Organizations. Non-Profit Tax ID # _____
 Yes, I/we will provide my/our own 10x10 tent.
 Yes, I/we would like Autism Care Today to rent a 10x10 tent for an additional fee of \$100.

COMPANY INFORMATION

Company Name: _____

Product/Service Exhibiting: _____

Contact Name: _____

Billing Address: _____

City/State/Zip: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____

E-mail Address: _____

Waiver Agreement: Upon booth registration acceptance to the 9th Annual **ONEHOPE** Autism Care Today for Military Families 5k/10k & Family Festival at Tecolote Shores in Mission Bay Park, San Diego on April 20, 2019, I/we hereby waive, release, and discharge any and all claims for damages for personal injury, death or property damage which I/we may have or which hereafter may occur to me, as a result of participating in this activity. This release is intended to discharge in advance Autism Care Today its officers, employees, and agents; and the City of San Diego from any and all liability arising out of or connected in any way with my/our participation in said activity, even though that liability may arise out of negligence or carelessness on the part of Autism Care Today, its officers, employees, volunteers, and agents. It is further agreed that this waiver, release, and assumption of risk is to be binding on my/our heirs. I/we agree to indemnify and hold Autism Care Today its officers, employees, and agents free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my/our death, injury, or property damage that I/we may sustain while participating in said activity. I/We acknowledge that booth registration fees are non-refundable.

PAYMENT INFORMATION

Total Amount: _____

- Check payable to Autism Care Today enclosed. (Non-profit tax ID # 20-1424642)
Mail to: Autism Care Today 509 Marin Street, Suite 123, Thousand Oaks, CA 91360

- Please charge my/our: Visa MasterCard American Express

Credit Card Number: _____

Name on Credit Card: _____

Exp Date: _____ Security Code: _____

Authorization Signature: _____

Please scan and email form to Matt@act-today.org.
Please provide billing address and name on card, if different from above company information.