



PORTFEST SILENT AUCTION PARTICIPANT APPLICATION & AGREEMENT

Agreement made this _____ day of _____, 2015 between HEARTS of Port Washington's PortFest Music, Art & Community Festival ("PortFest") and _____ ("Silent Auction Participant").

It is mutually agreed between the parties as follows:

1. Name of Silent Auction Participant: _____

2. Name and Place of Silent Auction: PortFest 2015, Schreiber High School Campus

3. Date & Hours of Event: Saturday, May 16, 2015 from 11:00am to 5:00pm

4. Agreed Price: No Charge – Tax Deductible Contribution of Goods and/or Services

5. Cancellations: Must not be made by either party less than 30 days prior to the date of exhibition

6. Selection: Silent Auction Participant will provide a detailed description of Silent Auction offering of goods and/or services with approximate retail value on the attached "**PortFest Silent Auction Items**" form and return by the **April 16, 2015** deadline for final selection and approval by the PortFest Silent Auction committee.

The Silent Auction Participant agrees to provide all information and/or materials to a PortFest representative by the designated date, time and location. It is understood that HEARTS of PW and PortFest are not responsible for packaging or transportation. Please provide the retail value of each price for appropriate pricing to be submitted to the Events committee for listing purposes.

Hold Harmless and Indemnity

Artist shall, through the signing of this document by an authorized party or agent, indemnify, hold harmless and defend HEARTS of Port Washington, PortFest, Port Washington Union Free School District and, the town of Port Washington, the Town of North Hempstead and their agents and employees from all liability, judgments, suits, costs and actions, including attorneys' fees and all costs of litigation of every kind and description brought or rendered against said parties as a result of loss, damage, or injury to persons (including death) or property by reason of any act or failure to act by the Artist.

This constitutes the sole, complete and binding agreement between the parties hereto:

Name of Agent for HEARTS/PortFest

Silent Auction Participant

Signature of Agent for HEARTS/PortFest

Participant or Agent Signature

PO Box 1192

Address

Address

Port Washington, NY 11050-1192

City, State, Zip

City, State, Zip

(516) 472-2699

Main Telephone Number

Main Telephone Number

Mobile Telephone Number

Mobile Telephone Number



Port Washington Music, Arts & Cultural Festival

PORTFEST SILENT AUCTION ITEMS

Provide Complete Description of All Goods and/or Services for Silent Auction	Retail Value (USD)
	\$

(Use additional page(s) if needed)