

AGREEMENT FOR PARTICIPANTS OF THE SPRINGVILLE WNY DAIRY/AGRICULTURAL FESTIVAL

INSURANCE AGREEMENT & HOLD HARMLESS REQUIREMENTS

June 3, 2017 – June 4, 2017 (THIS DOCUMENT & CERTIFICATES MUST BE RECEIVED NO LATER THAN 5/13/17)

ALL PARTICIPANTS MUST SIGN THE HOLD HARMLESS AGREEMENT BELOW:

_____ (Participant) shall defend, indemnify and hold harmless, **Springville WNY Dairy/Agricultural Festival**, its officers and committee chairpersons, from and against any and all liability, damages, expense, causes of action, suits, claims, penalties or judgments arising from injury to persons or property, including death, sustained by any person or persons, arising directly or indirectly out of activities carried out during this special event.

_____ Signature of Legal Representative

_____ Name of Legal Representative (print)

_____ Date **IN ADDITION TO THE HOLD HARMLESS AGREEMENT ABOVE, THE SPRINGVILLE AREA CHAMBER OF COMMERCE ALSO REQUIRES PROOF OF INSURANCE OF AT LEAST ONE MILLION DOLLARS FOR THE TRADE SHOW PARTICIPANTS with the SPRINGVILLE AREA CHAMBER OF COMMERCE ITS BOARD OF DIRECTOR MEMBERS, ITS EXECUTIVE DIRECTOR, AND ITS MEMBERSHIP AND THE SPRINGVILLE WNY DAIRY/AGRICULTURAL FESTIVAL, ITS OFFICERS AND COMMITTEE CHAIRPERSONS NAMED AS ADDITIONAL INSURED.**

INSURANCE REQUIREMENTS FOR ALL FOOD VENDORS OF ANY TYPE, AND ANY PARTICIPANTS THAT UTILIZED MOTOR VEHICLES OF ANY TYPE EITHER IN THE PARADE OR ENTERTAINMENT VENUE WILL BE REQUIRED TO PROVIDE A CERTIFICATE OF INSURANCE EVIDENCING THE FOLLOWING:

The Certificate of Insurance should name **Springville WNY Dairy/Agricultural Festival it officers and committee chairpersons, P. O. Box 368, Springville, NY 14141** as additional insureds on a primary non-contributory basis with limits of liability of at least:

\$1,000,000 for each Occurrence/\$2,000,000 Aggregate for Bodily Injury and Property Damage,

\$1,000,000 for Products and Completed Operations

\$1,000,000 Personal Injury/Advertising Injury

\$1,000 Medical Payments Coverage

INSURANCE REQUIREMENTS FOR AMUSEMENT RIDE, FIREWORKS AND PARTICIPANTS UTILIZING MOTORIZED VEHICLES IN THEIR PERFORMANCE MUST ALSO NAME THE FOLLOWING AS ADDITIONAL INSUREDS AND MUST CARRY AN AGGREGATE LIMIT OF \$3,000,000 IN LIEU OF \$2,000,000 NAMED ABOVE:

Springville-Griffith Institutes Central School District, 307 Newman St, Springville, NY 14141

Village of Springville, its employees, interim administrators, elected and appointed officials and its authorized volunteers and committee members. P. O. Box 17, Springville, NY. At the Village's request the participant may be asked to also produce a copy of their declarations page and a copy of the additional insured endorsement parts of the policy.

The Springville Area Chamber of Commerce, PO Box 310, Springville, NY 14141