

COMMUNITY BOOTH EVENT APPLICATION FORM

1. Contact information of legal entity for this agreement:

ORGANIZATION: _____

(Organization name must be the same as the named insured on the insurance policy that will be submitted with this event application form.)

Address: _____

Contact: _____ Email: _____

Telephone: _____ Cell Phone: _____

2. SIGNING AUTHORITY on behalf of the legal entity (officer or director of the company/organization): (Please note we will not accept any signatures unless they are authorized to sign – verification required.)

Contact: _____ Title: _____

Email: _____ Telephone: _____

3. Date(s) and time of event: _____

4. Set up date: _____ Time: _____

Tear down date: _____ Tear down time: _____

5. Expected public attendance to your event: _____

6. Total number of personnel you require to be in the area at any one time during the event: _____ (Licensor has the right to limit the number of personnel operating at the event at any one time)

7. Tell us about your organization (Purpose, goals, mission, vision): _____

8. What is the purpose of your event? _____

9. If applicable, please provide (or drop off) a copy of your brochure, marketing print resources, website URL and social media handles.

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10. If you are a registered Charity, please provide your **Charity Registration number:** _____

11. Tell us in detail what you are planning to do at the Community Booth: _____

12. Please acknowledge the following:

- We will not be engaging in active selling or solicitations of any kind.
- We will not have music as part of our display.
- We understand that we cannot take photos or videos while at the Community Booth.

13. Equipment that the organization will provide/set up in the shopping centre/building (at own cost):

14. Equipment to be loaned from shopping centre/building (free of charge):
 8.5'x 10.5' Community Booth (includes up to 4 stools, electrical access, and 2 inserts for 22"x28" signage)

15. Electrical access required: Yes No *Note: Wi-Fi is not available.

16. Additional requirements/comments: _____

17. **PRIOR TO PROVIDING AN AGREEMENT: The Organization must submit for the Licensors review and approval** an insurance certificate evidencing comprehensive commercial general liability insurance with coverage limits of not less than \$5 million per occurrence without being subject to a general aggregate limit of not less than \$5 million including a waiver of subrogation and naming the following parties named as additional insureds:

- Surrey CC Properties Inc. (2153 Central City, 10153 King George Blvd., Surrey, BC, V3T 2W1)
- PMP 2011 Nominee Ltd. (c/o Alberta Investment Management Corporation, 1100 – 10830 Jasper Avenue, Edmonton, AB, T5J 2B3)
- Blackwood Partners Management Corporation (same address as Surrey CC Properties Inc.)

18. Provide a copy of all required permits and licenses for the event prior to the date of the event:

	Required	Received
Insurance Certificate (as noted above)	_____X_____	_____
Other: _____	_____	_____

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EVENT APPROVAL:

Organization to submit application minimum four weeks in advance of event. Event subject to approval.
Section to be completed by: BLACKWOOD PARTNERS MANAGEMENT CORPORATION

Requested by: _____
Marketing Manager

Date: _____

Approved by: _____
General Manager

Date: _____

Comments:
