

**Friends of Albany Seniors
Barbara Van Pelt
846 Masonic Avenue, Albany, CA 94706
Phone: 510. 524-9122 / Fax: 510.524-8940**

**HOLIDAY MARKET APPLICATION
Saturday, DECEMBER 3, 2011
11AM-4PM**

GROUP NAME: _____

CONTACT NAME _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ ALTERNATE PHONE: _____ EMAIL: _____

MERCHANDISE DESCRIPTION:

SET UP REQUESTS: _____

OTHER INFORMATION: _____

The Albany Senior Center will provide a 6' table and chair.
A donation to the Friends of Albany Seniors of 10% of the day's proceed is requested from each vendor.

RELEASE OF LIABILITY: I AGREE to assume the risk of accident or injury or loss sustained from whatever cause in connection with the activity, and release the City of Albany & the Friends of Albany Seniors, their officers, agents and employees from any and all liability for any such accident or injury or loss caused by whatever reason, including but not limited to an act of omission. I understand that no medical insurance is provided.

PHOTO RELEASE: I acknowledge that the City of Albany & Friends of Albany Seniors take photographs and videotapes of its activities and events for publicity purposes and authorize the use of my image by the City for such purposes. I understand I will not be compensated for use of photos or videos.

Signature: _____ Date: _____