



SUNDAY FUNDAY AT THE PLAZA WITH CARE PARTICIPANT FORM

CARE is hosting "Sunday Funday at the Plaza with CARE" to promote a very positive sense of community by collaborating with nonprofit organizations, human service organizations, community organizations, City, County, State, School, NMSU Departments/Groups/Clubs, art groups/organizations, artists, youth groups, hospitals, clinics, vendors, entertainers, etc. Simply put, any individual or entity that has something to offer or showcase to our community. This is an opportunity for all to come together and participate together and work in partnership to promote our missions, visions, culture and products to our community. It also gives us the platform to interact and inform our community the role each of us has taken to make our community a better place to live, all while enjoying entertainment and food from two supporting food trucks. Normal Sunday time of event is: 3:00 p.m. to 6:00 p.m. Time may change during hot months.

**Contact: Yolanda "Yoli" R. Diaz, Executive Director (575) 649-0598 Email: yolidiaz6@msn.com
CARE – Cancer Aid Resource & Education, Inc., 118 S. Water St., Las Cruces, NM 88001**

PLEASE COMPLETE THIS FORM AND EITHER EMAIL OR MAIL IT TO CARE:

Email to: yolidiaz6@msn.com or Mail/Deliver to: CARE, 118 S. Water St., Las Cruces, NM 88001
Please circle any or all of the Sunday participation dates of 2018 that you would like to participate in:

Feb 04 Mar 04 Apr 15 May 06 Jun 03 Jul 01 Aug 05 Sep 02 Oct 07

Contact Person Name: _____

Contact Person Phone Number: _____

Email address: _____

Participant Name: _____

Participant Address: _____

Participant Type: _____

(Nonprofit Organizations, Human Service Organizations, Community Organizations, City, County, State, School, University Departments/Groups/Clubs, Hospitals, Clinics, Art Groups/Organizations, Artists, Youth Groups, Vendors, Entertainers, Etc.)

Description of service, product or entertainment: _____

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT/RELEASE:

In consideration of this entry being accepted, I hereby for myself, my heirs, representatives and executors, waive, release and forever discharge any and all rights and claims for loss of damages which I may or hereafter accrue to me against CARE and City of Las Cruces, any organizers, volunteers or sponsors of this event, third parties, for any and all personal injuries or property damage which might be suffered by me in this event. I attest and verify that I am physically fit and can provide my own set up and tear down duties, products, information, equipment and supplies. I hereby grant full permission to use my name, photographs, videotapes, and recordings of this event for legitimate purpose without compensation/remuneration.

Signature: _____ Date: _____