

OAK HILLS HOLIDAY BAZAAR DECEMBER 6th & 7th, 2024



VENDER CONTACT INFORMATION

Name		Address	
Phone		City	
Email		Zip Code	

Are you an Oak Hills resident? (circle one) YES / NO

If you do **NOT** live in Oak Hills but are **sponsored** by an Oak Hills resident, please provide your sponsor's contact information:

SPONSOR CONTACT INFORMATION (only necessary for sponsored non-residents)

Name		Address	
Phone		Email	

Please tell us more about what you create and your vendor needs for the event.

What do you make? <i>Describe your handcrafted product or artwork, including a price range of goods. Email Pics to OHHA@gmail.com</i>	
Number of tables (6 feet)? Second tables are limited.	
Electrical outlets? (circle one) These are limited accommodations*	YES / NO
*If you need an electrical outlet, please describe the reason.	
Please list any other special needs you may require.	

VENDOR REGISTRATION FEES (per 6 foot length table)

\$40 Oak Hills residents

\$60 non-resident vendors

Oak Hills Owners may sponsor a vendor whose address is outside Oak Hills Proper boundary, but their fee will be the same at non-resident vendors. Payments accepted online (oakhillsoregon.com/holiday) or personal check (payable to OHHA).

All vendor registration fees must be paid prior to the event.

RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS

Please read carefully before signing. This is a release of liability and waiver of certain legal rights.

I, the undersigned participant, hereby agree to hold harmless the Oak Hills Homeowners Association (OHHA), its directors, officers, agents and employees, against any liability resulting from any injury that may occur, and also to indemnify the OHHA for any damages incurred arising from any claims, demand, action or cause of action relating to the participant.

I authorize any representative of the OHHA to have the participant treated in any medical emergency during their participation in the OHHA programs and also agree to pay all costs associated with medical care and transportation of the participant. I have read the above Liability Release and signed it with full knowledge of its content and significance.

SIGNATURE _____ DATE _____