



REGISTRATION AGREEMENT

SCHUYLER FAMILY FIT FEST featuring Strong Kids, Safe Kids

Saturday, September 17, 2022 from 10 am to 1 pm

Montour Falls Fireman's Festival Grounds | State Route 224/Clawson Blvd., Montour Falls, NY

Business/Organization Name _____

Contact Person _____

Email Address _____

Business/Organization Address _____

Business/Organization Phone: _____

Representative Name(s) that will be manning your booth. *Please include email and cell phone number:*

1: _____

2: _____

About the Schuyler Family Fit Festival

Cayuga Health System (Schuyler Hospital, Cayuga Medical Center and Cayuga Medical Associates), in partnership with Schuyler County Public Health and Strong Kids, Safe Kids presents the Schuyler Family Fit Festival! This free event promotes the education of health and wellness to our neighbors. As an exhibitor, you will share how your business or organization supports a healthier and more vibrant lifestyle within the community.

I AM A (please check one):

Strong Kids, Safe Kids Exhibitor
(providing activities geared towards kids)

General Festival Exhibitor
(providing activities geared towards adults)

1. Community Wellness - How does your business relate to health and wellness?

2. Activities - What interactive activities are you planning for your booth? (Please list three options below)

3. Giveaways - In addition to any agency materials and educational handouts, please describe any "freebies" and/or food you will be handing out. Please note, this is a healthy event, so items such as candy will not be permitted.

4. Registration - Exhibitors must register by August 31, 2022

Please return this completed form to:
Attn: Michelle Benjamin
Schuyler Hospital | 220 Stuben St | Montour Falls, NY 14865

by email benjaminm@schuylerhospital.org

fax: 607-210-1951

Space is limited and offered on a first-come, first-served basis. To secure your table at the Schuyler Family Fit Festival you must submit this form and a Certificate of Insurance.

5. Insurance - It is required that all business/organization's participating in the Schuyler Family Fit Fest secure and maintain the following general liability insurance coverage: \$1,000,000 per occurrence. Furthermore, every business must name Cayuga Medical Center, Schuyler County and the Village of Montour Falls as additional insured. A copy of your certificate of liability insurance **must** be submitted with agreement. An example certificate of insurance is attached for your reference.

6. Schedule - You are required to set-up and tear-down your own display. There is no early tear-down option available.

8:30 to 9:30 am Festival Set Up

10 am to 1 pm Schuyler Family Fit Festival

1 to 2 pm Festival Tear Down

7. Tables - An 8' table (2) chairs will be provided. If your display is taller than 3' for a table top display or 6' for a floor display, please let us know! We need this information to aid in the lay-out of the vendor tables. After the event, please tear-down your display and bring tables and chairs to designated area.

8. Electricity - *If you do not select this option, you will not have access to electric.*

Yes, display requires electrical hook-up (Each business is responsible for its own electrical cords)

No, display does not require electrical hook-up

9. Sales - Sales of your products or services are allowed pending review by the Schuyler Family Fit Festival Committee. You must list below the products or services you would like to sell. Schuyler Family Fit Festival Committee will review this information. You will be notified of their decision **no later than August 31, 2022**. You may only sell products or services that have been approved by the committee.

10. Check-In at the Event - Upon arrival, please be sure to register for the event at the Cayuga Health System booth. Please maintain a copy of this agreement for your records.

If you have any questions prior to the event, please contact Schuyler Hospital, Michelle Benjamin by phone at 607-210-1950 or by email at benjaminm@schuylerhospital.org

I hereby agree and promise to abide to all terms and conditions outlined above.

Signature: _____

Date: _____