



SASS®

Single Action Shooting Society®
215 Cowboy Way, Edgewood, New Mexico 87015
505-843-1320 • Fax 505-843-1333
www.sassnet.com

SASS CONVENTION 2009 Exhibitor Indemnification and Liability Release

Exhibitor Name: _____ SASS #: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

PLEASE READ THE FOLLOWING DISCLAIMER, AND SIGN BELOW:

I agree to indemnify, defend, and hold harmless The Single Action Shooting Society, Inc., and all of its officers, agents, and employees from any and all liability, claims, damages, or injuries to any person, including injury to Exhibitor's employees, and all claims that arise from or are connected with the performance or failure to perform the work or other obligations of this agreement, or as caused or claimed to be caused by the acts or omissions of Exhibitor, its agents or employees.

Exhibitor assumes responsibility and agrees to indemnify and defend the Single Action Shooting Society, Inc., and the Riviera Hotel and their respective employees and agents against any claims or expenses arising out of the use of the exhibition premises.

The Exhibitor understands that neither the Single Action Shooting Society nor the Riviera Hotel maintain insurance covering the Exhibitor's property and it is the sole responsibility of the Exhibitor to obtain such insurance.

I understand The Single Action Shooting Society, Inc. cannot be responsible for any acts of God (e.g., rain, wind, or fire), or damage or theft.

The Exhibitor grants permission to The Single Action Shooting Society, Inc. and other participating media to utilize Exhibitor's image or likeness incidental to any live or recorded video display or other transmission for reproduction in whole or in part of this event and any advertisements and or promotional materials provided by The Single Action Shooting Society, Inc. it's sponsors or participants.

I understand this agreement is between myself and The Single Action Shooting Society, Inc.

I understand my deposit is NON-REFUNDABLE after October 1, 2009.

SIGNATURE: _____ DATE: _____

NOTICE TO BROKER

From Policy Holder:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Phone: _____ Fax: _____

Policy Number: _____ :

RE: Certificate of Insurance

Please provide the following company with a Certificate of Insurance. Certificate Holder listed as follows:

The Single Action Shooting Society
215 Cowboy Way
Edgewood, New Mexico 87015
505-843-1320 • Fax 505-843-1333

Description of Operations/Locations/Special items - "should read"

Certificate Holder is named as ADDITIONAL INSURED as respects to SASS Convention 2009 at the Riviera Hotel, Las Vegas, Nevada..

Should you have any questions regarding this request, please feel free to call me at the above listed policy holder phone number. Thank you in advance for taking care of this in a timely manner.

Sincerely,

Policy Holder

PLEASE RETURN ORIGINAL TO SASS AND KEEP ONE COPY FOR YOUR RECORDS