



oneofakind

Show and Sale® **Chicago**

INSURANCE RELEASE FORM

REQUIRED

DEADLINE: November 6, 2009

This signed form and Insurance Certificate must be returned with all other forms no later than November 6, 2009. Exhibitors will not be allowed to enter the Show or exhibit unless they sign this form.

Merchandise Mart Properties, Inc. ("MMPI"), the operator and manager of the One of a Kind Show and Sale® and its related shows (collectively the "Show"), will attempt to provide a safe and secure environment at the Show. Details of the Show's security arrangements are available upon request. The Exhibitor acknowledges, however, that MMPI, the Show Parties (as defined below), and the Show disclaim responsibility for any loss, cost or damage to your property, artwork, product, displays, etc. and that neither MMPI nor the Show Parties carry any insurance for the benefit of Exhibitor.

As further consideration for acceptance of Exhibitor's application and participation in the Show, the undersigned Exhibitor acknowledges and agrees that (a) its participation in the Show is solely at its own risk, and (b) it is required to carry insurance to cover the risks described in this Release and the Rules and Regulations for the Show. Exhibitor agrees to indemnify, protect, defend, hold harmless, release and discharge the Show, MMPI, MTS – MM LLC, and all of their respective principals, agents, owners, members, trustees, affiliates, subsidiaries, predecessors, successors, employees, and assigns, and all other related persons or entities, named or unnamed (collectively the "Show Parties"), from any and all liability, claim or demand of whatever nature, actions, and causes of action, damages, costs, losses, attorneys fees, injuries of any kind, and compensation for damage or loss to person or property, including to art work, regardless of the cause and regardless of whether such loss, cost or damage is due to any form of negligence of MMPI or Show Parties. Tenant's Property Insurance policy shall provide that it is specific and not contributory and shall contain a clause pursuant to which the insurance carrier waives all rights of subrogation against Landlord with respect to losses payable under such policy.

Dated: _____, 2009

Acknowledged and Agreed:

Exhibitor: _____ Signature: _____

E-Mail or Fax this form to: **2009 One of a Kind Show and Sale®, Attn: Lauren Serantoni**

PHONE: (312) 527-3066, FAX: (312) 527-7998, E-MAIL: lserantoni@mmart.com

