
Appearance Request Form



Name of Event: _____ Event Date: _____

Time of the appearance (starting and ending time): _____

Contact Person: _____ Daytime Phone: (____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Fax: (____) _____ Event Day Phone: (____) _____

Appearance City: _____

Type of Event: School Parade Youth Hockey Party
 Charity BEARS Sponsor Non-BEARS Sponsor

Estimated number of individuals at event: _____

BRIEF DESCRIPTION OF EVENT and what you would like the mascot to be involved with:

DIRECTIONS & MILEAGE FROM GIANTSM CENTER (Please assume we have no knowledge of your area. (Please attach any maps)

MILES: _____ DIRECTIONS: _____

Please read and sign:
I, the undersigned, will provide:

A clean, private changing room where valuables can be safely stored no more than 50 yards from the performance area [bathrooms are not an option] a parking spot no more than 50 yards from the changing area; and a chance to break during the performance.

The performer or any other authorized individual has the right to cancel the appearance, without a refund, immediately upon notice to you, (i) if the above requirements are not met, or (ii) at any time during the actual event, the performer or other authorized individual reasonably believes (a) the health or safety of the performer or event attendees is in danger (real or perceived, actual or threatened), (b) the security of the costumes is jeopardized, or (c) any other reason provided such reason is made in good faith. The individual signing this agreement assumes all risk and liability during the performance.

The performance price is \$150 for one (1) character and one (1) guide, for up to two (2) thirty (30) minute appearances during the event, with a minimum of thirty (30) minutes between each appearance. All appearances must occur within a two (2) hour timeframe, commencing at the start of the first appearance. Any changes to the number of characters, guides, or appearance times, or events taking place more than thirty (30) miles from HERSHEY PARK must be discussed at the time this form is submitted, and is subject to additional expense. Full payment is due at least one (1) week in advance of the event. THIS IS ONLY A REQUEST FORM – it will become an agreement only if you receive a CONFIRMATION by phone or email from an authorized representative of Hershey Entertainment & Resorts Company. Once confirmed, the agreement is not cancellable and no refunds will be provided.

Signature _____

The following type of payment is accepted: Check or Money Order (cash or credit cards are not accepted)

Please make check or money order payable to: **Hershey Entertainment & Resorts**

Phone: 717-534-3846

Fax: 717-534-3336

Email: hapkiscadden@hersheypa.com

Send to: Hersheypark Entertainment Department / Coco Appearance Request • 100 West Hersheypark Drive • Hershey, PA 17033