



CUBBIE BEAR APPEARANCE AGREEMENT



Appearance Date _____ Begin Time _____ End Time _____

Appearance Fee _____

Company/Organization Name _____

Contact Person _____

Appearance Location _____

Address _____

City, State, Zip _____

Contact Phone _____ E-mail _____

Directions from Principal Park to site of Cubbie Appearance _____

Describe your event, and the role of Cubbie in your event _____

Approximate Number of Children Expected _____

The Iowa Cubs reserve the right to pass out any literature or prizes that we feel are appropriate. Cubbie does not speak, but will pose for pictures and sign autographs. Cubbie reserves the right to walk away from any appearance that the performer deems unsafe or harmful to them and/or guests. The Iowa Cubs are not liable for damages inadvertently caused by the costume. By signing the line below you acknowledge the terms that have been agreed upon by the Iowa Cubs and your company/organization.

Print Name

Signature

Date

Iowa Cubs
Attn: Eric Hammes
One Line Drive
Des Moines IA 50309
515.243.6111 (phone)
515.243.5152 (fax)