

Arts for All Clatsop County
A program of the Arts Council of Clatsop County

Participant Agreement

Name of Organization: _____
Contact Name/Title: _____
Contact Email/Telephone: _____
URL for Arts for All website link: _____
Phone number for Arts for All inquiries: _____

As a participant in the \$5 Arts for All ticketing program, I confirm that:

- Our organization agrees to provide \$5 Arts for All tickets for selected events/attractions, as available, to individuals displaying an Oregon Trail Card or proof of SNAP benefits. We understand our organization can determine which events are eligible for Arts for All tickets and how many tickets will be available for sale.
- Our organization agrees that the \$5 Arts for All ticket cost is all-inclusive of ticket handling or service charges. It is our responsibility to build a ticket price that totals \$5 including any and all fees.
- We understand that our organization may determine the maximum number of tickets that can be purchased at \$5/ticket by each patron displaying an Oregon Trail Card or SNAP benefits. The Arts for All steering committee recommends a minimum of two and not more than four per card holder.
- If our organization offers advance ticket sales, that offer will be extended to Arts for All patrons. Arts for All ticket purchases may be made by credit card in advance and the Oregon Trail Card or letter awarding SNAP benefits displayed when tickets are retrieved at will call.
- Our organization agrees to include information on our website about purchasing Arts for All tickets (box office location, hours, telephone number as available) as well as specific details about how many tickets each Arts for All patron may purchase and information about which upcoming events have Arts for All tickets available. Our organization's website will include a link to the Arts for All page on the Arts Council of Clatsop County's website: clatsopcountyartscouncil.com. It is our organization's responsibility to keep this information up to date.
- Our organization agrees to track the number of tickets issued through the Arts for All program and provide that information to the Arts Council of Clatsop County upon request.

As a participant in the \$5 Arts for All ticketing program, I understand that:

- The Arts Council of Clatsop County will devote a page on their website: clatsopcountyartscouncil.com to the program as a whole, with basic links to the participating organizations.
- Our organization can send information about upcoming Arts for All events for posting on the Arts Council of Clatsop County's Facebook page.
- Our organization may withdraw from the program at any time by providing 30 days' written notice to the Arts Council of Clatsop County.

This agreement shall go in effect as of the date below and continue until either 1) the program is discontinued; or 2) our organization formally withdraws from participation in the program. By signing below you agree to the above terms of participation in the Arts for All program.

Signature: _____ Name/Title: _____ Date: _____

Please sign, date, and return this form to **Sheila Martin c/o Arts Council of Clatsop County**
2870 Log Bronc Way, Astoria OR 97103-3313; email: sheila@clatsopcountyartscouncil.com