

# Spring Carnival

free admission!

**SATURDAY APRIL 4, 2026**  
**9:30 A.M. TO 12:00 P.M.**

**EGG HUNTS \* LIVE MUSIC \* ARTS, CRAFTS & GAMES \* VENDORS \* VISIT FROM PETER RABBIT**  
**LITTLE COTTONWOOD PARK (4000 FARQUHAR AVENUE, LOS ALAMITOS)**

## Sponsorship Opportunities

Below are the Sponsorship Opportunities that detail the rewards you will be offered in exchange for your generous donation. All proceeds from the event go directly to offset costs to host free events for the community.

Marketing Opportunities	Title \$7,500	Presenting (Egg Hunt) \$5,000	Gold \$2,500	Silver \$1,000	Community \$500
Company/Organization name in event title	✓	✓			
Company/Organization name under event title	✓	✓			
Name on banners displayed through City	✓	✓			
PA announcements on stage	✓	✓			
Logo in Recreation Brochure	✓	✓			
Sponsor banner near stage or entrance	✓	✓			
Press release	✓	✓	✓		
Social media	✓	✓	✓	✓	
E-News distribution	✓	✓	✓	✓	
Logo on website	✓	✓	✓	✓	✓
Booth space at event	✓ (20'x20')	✓ (10'x10')	✓ (10'x10')	✓ (10'x10')	✓ (10'x10')
Logo on event flyer (printed)	✓	✓	✓	✓	✓
VIP Parking Spaces	✓ (2)	✓ (1)			

**CONTACT:** City of Los Alamitos • Angel Hernandez  
 Phone: (562) 430-1073 Ext. 517 • Fax: (562) 594-9657  
 Email: [ahernandez@cityoflosalamitos.org](mailto:ahernandez@cityoflosalamitos.org)

\*\$1 Million General Liability Insurance required with Additional Insured Endorsement in favor of indemnified parties if your company is utilizing a booth space at the event may be required. Once confirmation is received, liability insurance instructions will be provided. A Certificate of Liability Insurance and Additional Insured Specific Endorsement naming the certificate holder must be submitted prior to event date, for the following certificate holder: City of Los Alamitos, the Los Alamitos Community Foundation, and its officers, employees, agents and volunteers (11911 Oak St., Los Alamitos, CA 90720) and its officers, employees, agents and volunteers (3191 Katella Avenue, Los Alamitos, CA 90720).

The City of Los Alamitos, and the Los Alamitos Community Foundation reserves the right to approve the groups that want to have a booth at a City sponsored event to ensure that the services and merchandise offered are consistent with the family-oriented entertainment event. The City funds a portion of the costs for the event and State Law prohibits the City from expending funds to support a campaign. As a result, no booths supporting or opposing candidates for public office, ballot measures, or other election activities other than voter registration will be permitted. Location of booth space will be made at the discretion of the City of Los Alamitos, and the Los Alamitos Community Foundation. Because of aisle clearance requirements between booths and emergency vehicle lanes, vendors will not be allowed to extend their booth beyond the allotted space. Event subject to change based on COVID-19 restrictions at the time of the event.

# SPONSORSHIP APPLICATION

Company / Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I, the undersigned, represent the listed organization and do hereby agree to contribute the agreed upon dollar amount or in-kind donation and to participate in the aforementioned activity and further agree to indemnify, defend, and hold harmless the City of Los Alamitos, the Los Alamitos Community Foundation, and the event sponsors or any other individuals or organizations associated with the above, and each of their officers, agents, or employees from any liability, claim, or action for damages resulting from or in any way arising out of, or in any way connected with participation in this activity. I further agree to abide by and enforce the rules and regulations of the City of Los Alamitos, and the Los Alamitos Community Foundation. My booth may be shut down by officials at anytime if they deem my product or marketing supplies to be unsuitable for the event participants or if they will cause damage or problems to the event location. I hereby certify that, on behalf of our organization, we shall be personally responsible for any damage or unnecessary abuse of booth, grounds, or equipment by our organization. I also grant my irrevocable right and permission with respect to photographs, videos, motion pictures, and/or sound recordings being taken of myself, my dependents, and/or my employees or volunteers.

I fully understand that my/my child's participation in the events/programs/classes listed below, exposes me/my child to the risk of personal injury, death or property damage. I hereby acknowledge that I/my child am/is voluntarily participating in this event/program/class and agree to assume any such risks. I hereby release, discharge and agree not to sue the City of Los Alamitos, LAUSD, the Los Alamitos Community Foundation, and each of their respective officers, agents, employees, representatives, board members, volunteers and sponsors for any injury, death or damage to or loss of personal property arising out of, or in connection with my/my child's participation in the event/program/class from whatever cause, including the active or passive negligence of City of Los Alamitos, LAUSD, the Los Alamitos Community Foundation, and each of their respective officers, agents, employees, representatives, board members, volunteers and sponsors, or any other participants in the event/program/class. The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/or statutory provision. I further certify that said person/minor is in good health and has no physical or other impediment which would endanger him/her from participating in such an activity. I hereby consent to any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to myself/my child by a physician or hospital selected by staff for any injury or incident arising out of or connect with this event/program/class. The City of Los Alamitos has put into place preventative measures and protocols to protect program participants from the spread of COVID-19 and any other contagious diseases; however, the City of Los Alamitos, cannot guarantee that you or your child will not become infected with COVID-19 and any other contagious diseases. Further, attending the recreation program could increase your risk and your child's risk of contracting COVID-19 and any other contagious diseases. By signing this Liability Release and Assumption of Risk, I acknowledge the contagious nature of COVID-19 and any other contagious diseases, and voluntarily assume the risk that my child and I may be exposed to or infected by COVID-19 and any other contagious diseases by attending the recreation program and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 and any other contagious diseases at the recreation program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, the City of Los Alamitos, the Los Alamitos Community Foundation, its officers, agents, and employees, and other program participants and their families. I voluntarily agree to assume all the foregoing risks and accept sole responsibility for any harm, injury, or damage that may befall my child or myself relating to me or my child's attendance to the recreation program. On my behalf, and on behalf of my child, I hereby release, covenant not to sue, discharge, and hold harmless the City of Los Alamitos, the Los Alamitos Community Foundation, its officers, agents, and employees (collectively "Released Parties") from any and all claims, including all liabilities, actions, damages, costs or expenses of any kind arising out of or relating to my child's attendance to the recreation program ("Claims"). I understand and agree that this Liability Release and Assumption of Risk includes any Claims based on the actions, omissions, or negligence, whether passive or active, of the Released Parties and irrespective of whether a COVID-19 and any other contagious diseases infection occurs before, during, or after me or my child's attendance at the recreation program. I HAVE CAREFULLY READ THIS WAIVER, RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- |                                                |                |
|------------------------------------------------|----------------|
| <input type="checkbox"/> Title                 | <b>\$7,500</b> |
| <input type="checkbox"/> Presenting (Egg Hunt) | <b>\$5,000</b> |
| <input type="checkbox"/> Gold                  | <b>\$2,500</b> |
| <input type="checkbox"/> Silver                | <b>\$1,000</b> |
| <input type="checkbox"/> Community             | <b>\$500</b>   |

**FOR MORE INFORMATION ON  
SPONSORSHIP OPPORTUNITIES, CONTACT:**  
Angel Hernandez  
Recreation Coordinator  
Email: [ahernandez@cityoflosalamitos.org](mailto:ahernandez@cityoflosalamitos.org)  
Phone: (562) 430-1073 Ext. 517  
Fax: (562) 594-9657

Item(s) at booth displaying/promoting: \_\_\_\_\_

My booth requires electricity and I am aware that it is my responsibility to provide my own generator.

I understand that my logo and completed sponsorship application must be provided at least three months before the event. Submissions past this deadline cannot be guaranteed placement in our promotional materials.

## Method of Payment

Pay by check, MasterCard, Discover, or Visa ONLY. Checks payable to the Los Alamitos Community Foundation.

Mail payment and completed form to: Los Alamitos Recreation & Community Services, 10911 Oak Street, Los Alamitos, CA 90720

Print Name: \_\_\_\_\_

Method of Payment (check one):  Check # \_\_\_\_\_  MasterCard  Visa  Discover

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_ CVV2: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature for Credit Card: \_\_\_\_\_ Date: \_\_\_\_\_