



Community Event Submission Form

The Milan Chamber of Commerce has a new service we are offering to our neighbors in the Milan area. The Milan Chamber may be able to post your event on the Chamber Calendar on our website.

To be included on our calendar we ask that you follow these guidelines when submitting your request.

- Event must be held in Milan.
- Your submission must be received a minimum of 3 weeks prior to the event.
- A signed release must be included with your submission (see added page).

1. Name of Event: _____

2. Date of Event: _____

3. Time(s) of Event: _____

4. Event Location: _____

5. Event Contact Name: _____

6. Event Contact Phone: _____

7. Event Website/  : _____

8. Event Email: _____

9. Admission Fee (?): _____

10. Are you currently a member of The Milan Chamber of Commerce? _____ Yes _____ No
 (This is not a requirement, only for Chamber records.)

Let us help you “get the word out”!

11. Tell us a little bit about your event and include information you would like the community, and any interested attendees, to know about your event. Things like, the purpose of the event, is it a fundraiser or benefit, what will be taking place during the event, music, food, silent/live auction, etc.

Submitted by: _____ Phone: _____

(Please provide a contact phone number in the event of questions or concerns.)



Community Event Advertising Release Form

EVENT NAME: _____

EVENT DATE: _____

As consideration for being allowed to post our event(s) on The Milan Chamber of Commerce calendar I agree to, and acknowledge the following:

1. I acknowledge that I, or any event officer or participant, will not hold The Milan Chamber of Commerce liable for any incorrect submissions or omissions that may result of The Milan Chamber of Commerce posting our event on the Chamber’s Calendar on their website.
2. I hereby realize that any liability that may arise as a result of negligence or carelessness on the part of the persons or entities posting this event information to the Chamber’s Calendar are hereby released of any and all possible liability.
3. It is noted that this posting is a courtesy that The Milan Chamber of Commerce is offering, and it is said noted that this posting is NOT to be considered as any form of endorsement.
4. The intent of the parties is that The Milan Chamber of Commerce, any and all of its officers, staff, or members shall be liability free with regard to anything in any way connected with this event.

I hereby certify that I have read, and completed, both pages of this Event Registration and Release Form, in its entirety. My signature below indicates that I fully understand it and agree to its contents.

Full Signature: _____
(Signature indicates agreement to terms and conditions.)

Printed name: _____ **Date:** _____

Send both signed pages of this form to:

Milan Chamber of Commerce
Attn: Amber Straw
P.O. Box 1036 Milan, IL 61264

Email: milanilchamber@gmail.com / Website: www.milanilchamber.org
Chamber Office: (309) 716-8144 / John Peters, President: (309) 787-9520 (x 2141)