

LETTER OF ACCEPTANCE

TO BE COMPLETED AND SIGNED BY NOMINEE or MANAGEMENT

Nominee	Name(s):
To: In C/O Attention:	Palm Springs Chamber of Commerce 190 W. Amado Road, Palm Springs CA 9226 Walk of the Stars
Dear City of I	Palm Springs and Palm Springs Chamber of Commerce -
I, the undersi gladly accept Stars Palm S	the nomination put forth on my behalf for a star on the Walk of the
☐ If selecte	ed, I will participate in person at the Walk of Stars star dedication ceremony.
☐ If selecte within two ye	ed, I will make arrangement to accept honor and schedule star ceremony ars.
	and and agree that the Palm Springs Chamber of Commerce will retain the Walk of the Stars star ceremony.
Name:	
Address:	
Telephone: _	
Email:	
Signature: Date:	

This original signed letter of agreement from Nominee must be returned to:

WALK OF THE STARS PALM SPRINGS C/O The Palm Springs Chamber of Commerce 190 W. Amado Road Palm Springs, CA 92262

Email: walkofthestars@pschamber.org

Udated 12/13/2021