

This form to be completed and signed by nominee.

Nominee Name(s):	
То:	Palm Springs Chamber of Commerce C/O Palm Springs Walk of the Stars 190 W Amado Road Palm Springs, CA 92262
Dear City of Palm Springs and Palm Springs Chamber of Commerce,	
acce	e undersigned do hereby gladly ept the nomination put forth on my behalf for a star on the Palm Springs Walk ne Stars.
	I will participate in person at the Walk of Stars dedication ceremony.
	I will assist in making arrangements to accept this honor and schedule star ceremony within two years.
	I understand and agree that the Palm Springs Chamber of Commerce will retain the rights to the Walk of the Stars ceremony.
Add	ress:
Telephone:	
Ema	il:
Sign	nature: Date:

This original signed Letter of Acceptance must be returned to:

Palm Springs Chamber of Commerce C/O Palm Springs Walk of the Stars 190 W. Amado Road Palm Springs, CA 92262 walkofthestars@pschamber.org