

## Holden's Parade of Lights Liability Form

All participants over 18 years of age must sign a separate liability form to participate. Each participant under 18 years of age must have their names listed and a liability form signed by a parent or guardian. Every participant in the group must sign and date a separate liability form whether driving or riding on float/truck/jeep.

I agree for myself, and for any minor, for which I am responsible, that participation in the Holden's Parade of Lights is at my own and any participant's own risk and liable to all parade rules. I further agree to make no claim whatsoever, on my own behalf or on the behalf of any other person, against the Town of Holden, the Town of Holden Recreation Department or the Town of Holden Fire Department, its officers or volunteers, for any loss or damage of any nature whatsoever, which occurs from any cause whatsoever, as a result of or arising out of this parade. Should any claim of any nature be brought against the Town of Holden, the Town of Holden Recreation Department or the Town of Holden Fire Department, its officers or volunteers as a result of any participation in the parade or any minor for whom I am responsible. I understand that the Town of Holden, the Town of Holden Recreation Department or the Town of Holden Fire Department, its officers or volunteers has made no provision and accepts no responsibility for the safety of the participant's person or property. It is the responsibility of every entry to be in possession of a liability form for each member, holding the Town of Holden, the Town of Holden Recreation Department, the Town of Holden Fire Department, its officers or volunteers harmless.

I have read and understand the regulations and the Liability form and agree to abide by them.

Name of applicant (please print): \_\_\_\_\_

X \_\_\_\_\_

X \_\_\_\_\_

Signature of Applicant or Guardian (if under 18 years of age).

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

LIST ALL PARTICIPANTS IN GROUP

Group name: \_\_\_\_\_

Contact name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Quantity in Group: \_\_\_\_\_

Participant's names: (Print Clearly)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
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18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_
21. \_\_\_\_\_