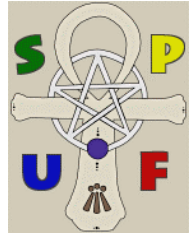


# Stanislaus Pagan Unity Festival 2008

October 4<sup>th</sup>, 2008 . 9am – 6pm

Held at Graceda Park 401 Needham St. Modesto, California



## LIABILITY WAIVER

Participants, presenters, entertainers, performers, vendors, spiritual readers or consultants, authors, healers, volunteers and staff Liability Waiver:

I (name) \_\_\_\_\_, participating in this event as a \_\_\_\_\_, as well as my family, **agree to hold harmless** The Association of United Pagans, Stanislaus Pagan Unity Festival, their Board of Directors, event coordinators, planners and/or organizers, property owners and the City of Modesto of any claims for loss, damage, injury or liability for ANY reason and from all activities while occupying the premises where the event is to be held.

Vendors and their employees, group members, and/or volunteers agree to comply with the list of information, rules and code of conduct provided with this waiver by the event organizer(s). All said Participants and the employees, group members and/or volunteers agree to comply with the decisions made by the Event Organizer(s) or their Agents as to the enforcement of the said lists of information, rules and Code of Conduct.

The Event Organizer(s) will do their best to fulfill the requirements of all said participants, however the layout of the entire event and placement of vending, food, and information booths, author, presenters, musical and entertainment venues, time for set up and tear down, vending placement and scheduling will be at the sole exclusive discretion of the Event Organizer(s) and planning committees..

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

Name of Business/Group: \_\_\_\_\_

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

Business Mailing Address: \_\_\_\_\_

Preferred Phone # (best for contact): \_\_\_\_\_

E-Mail: \_\_\_\_\_

Website URL (Address): \_\_\_\_\_

What will be at your booth? Please be as specific as possible:

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By signing this form you are agreeing to this waiver and verifying that you have read and understand the **Information Rules and Code of Conduct Policies**. Upon acceptance of your forms and fees by the Event Organizer(s) this will become your contract.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*Participant Signature and/or person responsible for employees and activities of the booth and/or group*

PRINT FULL NAME: \_\_\_\_\_