

Donald Festival Committee

Donald Daze: A Hazelnut Festival and Celebration
PO Box 335
Donald, OR 97020

Celebrating our rural life, agriculture, businesses, and community

Vendor Waiver

Name: _____

Address: _____

Day Phone: _____ Evening Phone: _____

Names of other participants	Relationship
_____	_____
_____	_____
_____	_____

Contact in Case of Emergency: _____ Phone: _____

Event Date: July 13, 2024

Statement of Agreement:

I, the undersigned, as a registered participant/vendor in Donald Daze: A Hazelnut Festival and Celebration, I have read and understand the contents and nature of this agreement. I acknowledge participation in Donald Daze: A Hazelnut Festival and Celebration may expose me, other members of my group, and volunteers to a variety of hazards. Dependent upon the nature of the performance, the risk of injury attendant with the performance, whether foreseen or unforeseen, cannot be eliminated due to the nature of the performance. I am trained for the type of services to be provided and agree to assume full responsibility for my own safety, and the safety of other members of my group.

By signing this release form, I agree to waive and discharge any and all claims and to hold harmless The Donald Festival Committee and City of Donald, its officers, employees, volunteers, and agents, Valley Pacific Construction, from any claim for injury or damages, except for their sole negligence, that may arise from, or in connection with my participant service described above. I agree that I am fully responsible for the payment of all costs resulting from the rendering of medical aid and ambulance services, and I authorize that all necessary first aid steps may be taken as prescribed by qualified personnel.

This agreement is intended to be as broad and as inclusive as is permitted by law. I understand this agreement and I have read this agreement in its entirety and I freely and voluntarily assume all risks and responsibilities associated therewith, and notwithstanding such, I agree to perform pursuant to this agreement and be bound by its conditions.

By signing below, I agree that I understand and consent to this statement.

Signature Date

Authorized Donald Festival Committee Representative

Connie Lindsay Chair
Signature Title _____
Date