

THEIR NEGLIGENCE to the fullest extent provided by law.

Name of parent/guardian: ___

Norco Fair Pet Parade Entry Form

Saturday September 3, 2022. Sign-ups start at 9am / Event starts at 10am

No Entry Fee

Please complete this form and bring with you to the event at 9am

Datalana	D. J. D J.	Det Ouwer Name	
Pet Name:	Pet Breed:	Pet Owner Name:	
Parent Name:(if owner is under 18)	Email:	Phone#:	
Home Address:	City / St	ate / Zip:	
WAIVER/RELEASE FOR	THE 2022 FAIR PET PARADE, EVEN	TS AND COMMUNICABLE DISEASES INCLI	UDING COVID-19
Name of participant		ASSUMPTION OF RISK / WAIVER OF LIA	
INDEMINIFICATION AGREEMEN	I		
In consideration of being allowed to	participate at the Fair Pet Parade 2022 and/or	related events and activities included but is not limited	d to listed events/activities:
parades, games, vendors, activities,		"event") which includes but is not limited to events and ses me to the risk of personal injury, death or property any such risks.	
2. I hereby release, discharge, hold	harmless and agree not to sue The Fair Commion with, my participation in the events from wh	nittee or City of Norco for any injury, death, or damagenatever cause, including the active or passive negliger	
		or myself, my heirs, administrators, executors, and as emands actions or suits arising out of or in connection	
	sposure to and illness from infectious diseases duce this risk, the risk of serious illness and de	including but not limited to MRSA, influenza, and CO eath does exist; and,	VID-19. While particular
5. I KNOWINGLY AND FREELY AS others, and assume full responsibility		Iknown, EVEN IF ARISING FROMTHE NEGLIGENCE	OF THE RELEASEES or
		or participation as regards protection against infection, I will remove myself from participation and bring such	
City of Norco, George Ingalls Eques		ext of kin, HEREBY RELEASE AND HOLD HARMLES ts, and/or employees, other participants, sponsoring a event	
	TO ANY AND ALL ILLNESS, DISABILITY, DEAR OTHERWISE, to the fullest extent permitted by	ATH, or loss or damage to person or property, WHETH by law.	HER ARISING FROM THE
Participant:	Participant signat	ure: Dat	te:
This is to certify that I, as parent/gua child/ward including the risks of pres communicable diseases. Furthermon and agree to his/her release provide	sence and participation and his/her personal re- re, my child/ward understands and accepts the d above for all the Releasees and myself, my s	EGISTRATION) Int, have read and explained the provisions in this wair sponsibilities for adhering to the rules and regulations use risks and responsibilities. I for myself, my spouse, spouse, and child/ward do release and agree to indemparticipation in these activities as provided above, EV	for protection against and child/ward do consent nnify and hold harmless the

_____ Parent guardian/signature: _____

Date: ___