



**DAMARISCOTTA PUMPKINFEST™
REGATTA PARTICIPANT WAIVER**

PRINT NAME/DATE: _____

HOME ADDRESS: _____

PHONE NUMBER: _____ **EMAIL ADDRESS:** _____

EMERGENCY CONTACT: _____

Have you ever been convicted of a crime or sex offense? _____

PLEASE CHECK ACTIVITY IN WHICH YOU WILL PARTICIPATE:

- PUMPKINBOAT BUILDING**
- TRUCKS/TRACTORS/FORK LIFTS**
- REGATTA - PADDLEBOAT RACES
AND MOTORIZED**
- SECURITY/TRAFFIC/SHUTTLE/PARKING**
- GENERAL VOLUNTEER**

In consideration of the right to participate in the above activities, I hereby waive all claims for myself and my heirs and assignees, against the Damariscotta Pumpkinfest™ and any of their volunteers, which I have or may have for any injury that may occur directly from my participation in the Pumpkinfest activities. I further agree to indemnify and hold harmless the said Corporation for and from any and all liability for damage or injury that may occur to me, or which I may cause by my participation in this event. I also give my permission for free use of my name and picture in any media currently existing or hereafter developed.

SIGNATURE AND DATE: _____

(Must be over the age of 18 to participate)

Damariscotta Pumpkinfest & Regatta™

P. O. Box 1101 Damariscotta, ME 04543-1101

info@damariscottapumpkinfest.com

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