

## 47th Annual Seafair Land Parade Saturday, October 8, 2022 – 10:00 AM

## **Entry Form**

Name of Business/Club/Organization/Individual

Mailing Address	Stata	
City	State	Zip
Name of Contact	Person	
Phone	Email	
Classification of I	Entry (check one):	
Float	Vehicle/s	Walkers
Color Guard	Band	Equine
Other (please	e specify)	
Description of En area):	try (to be used by the ann	ouncer at the parade judging
Will your entry h	ave music?yes	_no
	Dancers/Cheerleaders, ple	ease give approximate number of

## PLEASE RETURN ALL ENTRIES AS SOON AS POSSIBLE TO:

## ROCKPORT-FULTON CHAMBER OF COMMERCE 319 BROADWAY ROCKPORT, TX 78382

For more information, please contact the Chamber at 361-729-6445

Release, Waiver of Liability And Covenant Not to Sue Rockport-Fulton Chamber of Commerce, Rockport Seafair, The City of Rockport

**Parade Participant:** 

By acceptance of an invitation to participate in the Rockport Seafair Land Parade, I accept and assume all risks and responsibilities for any and all claims for property damages and/or personal injury to ourselves, our participants, guests, invites, and/or employees regardless of the nature or cause of the damage or injury and hereby release the Rockport-Fulton Chamber of Commerce, Rockport Seafair, and the City of Rockport, including those that are known and unknown, foreseen and unforeseen.

I agree to indemnify, defend and hold the Rockport-Fulton Chamber of Commerce, the City of Rockport and the Rockport Seafair and Volunteers harmless from any claim for property and damage or personal injury in connection with our activities in the Rockport Seafair Land Parade. I further convent not to commence or prosecute any action, suit or other proceeding against the Rockport-Fulton Chamber of Commerce, the City of Rockport, and/or Rockport Seafair and Volunteers as a result of any property damage or personal injury received by participating in the Rockport Seafair Land Parade.

This document shall be binding upon myself, my legal representatives, heirs, successors and assigns.

The undersigned has read and voluntarily signed this Release, Waiver of Liability and Covenant Not to Sue and agrees to be bound by its terms.

By:	Title:
Printed Name:	Organization:
Date:	
Witness:	_
Printed Name:	