TOWN OF ALBION
Albion Parks Department
211 East Park Drive • PO Box 27
Albion, IN 46701
(260) 636-2246 • (260) 564-1976

VENDOR WAIVER OF LIABILITY

I _(print name:)_____, willingly participate in an event hosted by the Albion Park Department on _(date:)_____.

In consideration of the opportunity to participate in this special event:

a) I will not hold the staff, board of directors, or volunteers of the Albion Park Department or Town of Albion responsible for any injury which should occur to myself, and all others assisting me as a vendor, that is not due to the negligence of said staff, board of directors, or volunteers. I understand that the staff, board of directors, and volunteers of Albion Park Department will do everything in their power to prevent such injury.

b) In addition, I agree to hold harmless the Albion Park Department and Town of Albion from any damages, injuries of any kind or character incurred by any member of the public caused by any product sold by me.

_____ _____

Vendor Contact – Printed Name Signature

_____

Date

Questions contact: Casey Myers albionparkdept@frontier.com