



## ROSENDALE INTERNATIONAL PICKLE FESTIVAL AFFIRMATION AND LIABILITY RELEASE

I, \_\_\_\_\_, hereby affirm that I have been well advised and thoroughly informed of the inherent hazards and policies of the event. I know that by participating in the Rosendale International Pickle Festival celebration, I am exposing myself to certain known and unknown liabilities in my direct and indirect interactions with the public and invitees of this event. I also understand that if I choose to hire help for the event, that I am directly responsible for their actions or injury. I hereby personally assume all risks associated with my voluntary participation in this event of any harm, injury or damage that may befall me or any employee or temporary help, as a result of my participation, whether foreseen or unforeseen.

I understand and agree that neither Rosendale International Pickle Festival or The Town of Rosendale and the State of New York, its members and/or directors and officers, all Sponsors and any of their representatives, successors and assigns shall not be held liable in any way for any occurrence in connection with my participation in Rosendale International Pickle Festival that may result in injury, death, or other damages to me or my family, heirs, or assigns, and in consideration of being allowed to participate in this event, I hereby personally assume all risks in connection with said event for any harm, injury, or damage that may befall me, including all risks connected therewith, whether foreseen or unforeseen; and further to save and hold harmless said event and persons from any claim by me, or my family, estate, heirs, or assigns arising out of my participation in this event.

I further state that I am of lawful age and legally competent to sign this affirmation and release, or that I have acquired the written consent of my parents or guardians; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document of my own free will.

It is my intention by this instrument affirmed by my signature below to exempt and release Rosendale International Pickle Festival and The Town of Rosendale, its members, directors and officers all Sponsors and any of their representatives, successors and assigns from all liability whatsoever form personal injury, employer's liability and workers' compensation, property damage of wrongful death arising out of or in the course of my participation in this event.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS AFFIRMATION AND RELEASE BY READING IT BEFORE I SIGN IT.

Signature:

Date:

Name (please print or type):

Business Name:

Address:

City, State Zip:

Phone:

Email:

**Please mail this signed form along with your payments.**

**Make checks payable to:** Rosendale Pickle Festival.

**The mailing address is:** Rosendale Pickle Festival, PO Box 533, Rosendale, NY 12472