

# Leprechaun Days PARADE VENDOR Form

Leprechaun Days Parade: **11:00 a.m. on Saturday, July 31, 2010**

**Organization:**

Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Alternate Contact Person \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Work \_\_\_\_\_

**Type of Merchandise Being Sold:** What will you be selling? (Please be exact.) The Leprechaun Days Committee reserves the right to deny inappropriate merchandise, food or services prior to and the day of the events.

\_\_\_\_\_

\_\_\_\_\_

Number of People Selling Items: \_\_\_\_\_

FEE: \$75.00 Please include with application form. Please make check payable to: Leprechaun Days Committee.

Questions? Please contact the Rosemount Parks & Recreation Office - 651-322-6000.

**DEADLINE: JUNE 9, 2010**

Return Form and Fee to: **Leprechaun Days Committee, P.O. Box 256, Rosemount, MN 55068**

**RELEASE AND WAIVER OF LIABILITY:**

1. I understand that: (a) Participation in this parade and related activities is completely voluntary. (b) The parade and related activities are being offered for the benefit of the participants. (c) Participation in the parade and related activities are planned and conducted by the Leprechaun Days Committee and not by the City of Rosemount, neither the Leprechaun Days Committee nor the City of Rosemount have made any representations about the safety of participation.
2. I agree that I will not hold either the Leprechaun Days Committee or the City of Rosemount, or their agents, officers, or employees liable for any claims, injuries, or damages of any nature I suffer as the result of my participation in the parade or related activities, regardless of the cause of those claims, injuries, or damages. I expressly release and discharge the Leprechaun Days Committee and the City of Rosemount, and their agents, officers, and employees, from any such claims, injuries, or damages.
3. If I am signing this Release and Waiver on behalf of my minor child or ward, I understand and agree that this Release and Waiver releases and discharges the Leprechaun Days Committee and the City of Rosemount, and their agents, officers, and employees from any claims, injuries, or damages that might be suffered by my child or ward. I further agree to indemnify and hold harmless the Leprechaun Days Committee and the City of Rosemount, and their agents, officers and employees for any expenses and liability they may incur as the result of the participation of my child or ward in the parade and related activities.

\_\_\_\_\_  
**Signature**  
(If participant is a minor, this Release and Waiver must be signed by a parent or guardian.)