

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

In consideration for receiving permission to participate in the Cali Calmécac PTA Move-a-thon, the Vendor hereby releases, waives, discharges and covenants not to sue The California State PTA, Cali Calmécac PTA, its agents, volunteers, or officers from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by the Vendor, or any of the property belonging to the Vendor whether caused by the negligence of the Vendor/Releaser, or otherwise, while participating in such activity, or while in, on or upon the premises where the activity is being conducted.

I am fully aware of the risks involved and hazards connected with the Cali Calmécac PTA Move-a-thon and I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be hazardous to me and my property. I voluntarily assume full responsibility for any risks of loss, property damage or personal injury, including death, that may be sustained by me or any loss or damage to property owned by me, as a result of being engaged in such activity, whether caused by the negligence of Vendor/Releaser or otherwise.

I authorize PTA and local media outlets to publish photos of myself and other representatives of my business for public promotion of PTA events.

I further hereby agree to indemnify and hold harmless the Cali Calmécac PTA, its agents, volunteers and officers from any loss, liability, damage or costs, including court costs and attorney fees, that they may incur due to my participation in said activity, whether caused by negligence of Vendor/Releaser or otherwise.

I understand that the Cali Calmécac PTA does not provide any insurance coverage for vendor participants for any circumstances arising from their participation in this event or any activity associated with or facilitating that participation. As such, I am aware that I should review my own insurance portfolio.

Date _____

Name of Business _____

Signature _____

Title _____