

*Apple Blossom Festival
Liability Release Form*

Apple Blossom Festival, Inc.,
Apple Blossom Committee
City of Payette

Activity or Event

Mud Volleyball

Participant's Name

I understand that participation in the above Activity or Event may be hazardous for the above-named participant.

In signing below, I assume risk of harm or injury which may occur to the participant as a result of participating in the above-named event or activity. I hereby release Apple Blossom Festival, Inc., Apple Blossom Committee, and The City of Payette and its officers, employees, or agents from any liability, costs and damages resulting from this individual's participation.

_____ / _____

Participant's signature / Date