

Waiver of Liability Agreement Form

Participant Name (Please Print) _____

Ferret Name (s) _____

Participant Address _____

City, State, Zip _____

Please read, and if you have questions, please contact Sue Holme at ferretunderground123@gmail.com.

Your signature below certifies that you have read and understand what you are signing.

1. I understand that I am solely responsible for my ferret (s) and anything my ferret (s) does while on the premises of the Washington County Fairgrounds while attending the Ferret Underground Ferret Fiesta.
2. I accept FULL responsibility for any damages or destruction as a result of my ferret's actions, including, but not limited to, any person(s) or property while attending the Ferret Underground Ferret Fiesta.
3. I further agree to indemnify and hold harmless to every Ferret Underground, its officers, members and all employees, including, but not limited to, Ferret Underground staff, members and volunteers and Washington County Fairgrounds, members, employees, staff and volunteers.
4. I agree to indemnify and hold harmless any other person(s), company, organization(s), exhibitor or vendor from any liability resulting from my ferret's behavior and attendance at Ferret Underground Ferret Fiesta.
5. **WITHOUT EXCEPTION.** I accept full responsibility for my ferret (s), its actions, health and behavior at Ferret Underground Ferret Fiesta. I am the ONLY person responsible for above named ferret (s) and accept this responsibility.
6. I agree that my ferret (s) is/are current on all ferret distemper immunizations and to the best of my knowledge, has/have not been exposed to any ferret that may have contracted or been exposed to any distemper virus through any means. I certify that the required documents will be readily available to show personnel. _____ (Initials)

I understand that this Release Agreement is a CONTRACT. I have read and fully understand the terms and conditions above and I am SOLELY RESPONSIBLE for above named animal to enter Ferret Underground Ferret Fiesta. I agree that I am legally competent to execute this Release Agreement.

Participants Name (Printed Name) _____

Signature _____ Date _____

(Must be 18 to sign or parent or guardian)