



# CLEAR LAKE AREA CHAMBER HARVEST FESTIVAL ~ GRAPE STOMP APPLICATION & WAIVER



*I, the undersigned, attest and verify that I am physically fit and have full knowledge of the risks involved in the Harvest Festival Grape Stomp Competition. I have read the entry information and rules and certify by my signature my compliance. I hereby expressly release the Clear Lake Area Chamber of Commerce, the City of Clear Lake, Iowa, Harvest Festival Committee, and any other individuals associated with the event from any and all responsibilities for any injuries, damages, suits, or actions of any sort that may arise out of or related to my participation in the Harvest Festival Grape Stomp.*

Team Name \_\_\_\_\_

Business Affiliation \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

***Team Members:***

**Player #1**

Print Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Signature \_\_\_\_\_

**Player #2**

Print Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Signature \_\_\_\_\_

***Mail/return to the Clear Lake Area Chamber at 205 Main Avenue, P. O. Box 188, Clear Lake, IA 50428 or fax to 641-357-8141.***