

Shag Fest

First Coast Shag Club Jacksonville FL



REGISTRATION FORM & WAIVER for Shag Fest June 27 - 29, 2024

a) Name 1: _____ Saturday food choice: Chicken ___ Salmon _____

Address: _____

Phone # _____ Email: _____ Club affiliation: _____

If you have received recognition from ACSC, Shag, BOP, National Living Legends of Dance. Please list below:

b) Name 2: _____ Saturday food choice: Chicken ___ Salmon _____

Address: _____

Phone # _____ Email: _____ Club affiliation _____

If you have received recognition from ACSC, Shag, BOP, National Living Legends of Dance. Please list below:

Tickets are transferable but NO REFUNDS or CREDITS will be given.

Choose Payment method: Check ___ Cash ___ PayPal w/Debit or Credit Card via Online _____

There is a \$5 per ticket convenience fee for payments made via PayPal. Go to www.FirstCoastShagClub.org

Waiver for Shag Fest 2024

Dated for June 27 - June 29, 2024

THIS CONTRACT & WAIVER/RELEASE is executed at Jacksonville, Duval County, Florida by the person(s) named below (herein referred to as "Releasor"), in order to participate in the activities conducted by the First Coast Shag Club, Inc. (FCSC). Releasor, his/her spouse, legal representatives, heirs & assigns, hereby releases, waives and discharges FCSC, its officers, directors & members (herein referred to as "Releasees") each of them from all liability to Releasor, Releasor's spouse, legal representatives, heirs & assigns, for any & all loss or damage & any claims or damages resulting in injury or death of the Releasor whether caused by negligence of Releasees or otherwise, while the Releasor is for any purpose participating in any activity or function sponsored by FCSC. *Releasor agrees to indemnify the Releasees & each of them for any loss, liability, damage or cost they may incur due to the presence of the Releasor at any activity or function sponsored by FCSC, whether caused by the negligence of the Releasees or otherwise, on a continuing basis from the date hereof. *Releasor hereby assumes full responsibility for the risk of bodily injury, death or property damage due to the negligence of Releasees or otherwise while for any purpose participating in any activity or function sponsored by FCSC on a continuing basis, from the date hereof. *in further consideration for Releasees providing activities or functions for the benefit of Releasor, Releasor promises to exercise due diligence, care, caution & responsibility in participating in all activities of Releasees, including the consumption of alcoholic beverages (regardless of who provides such beverages). Releasor promises to abide by all laws, rules & regulations of the state & local governments where Releasees' activity is being held. Releasor promises to abide by all rules of the facility where Releasees' activities are being held, as well as all rules published or announced by Releasees. Releasor acknowledges that despite any established laws, regulations, & rules & generally accepted norms for proper conduct, some persons may not conduct themselves in accordance therewith: Releasor thus assumes & accepts any risk associated with such conduct by others. *Releasor expressly agrees that this release, waiver & indemnity agreement is intended to be as broad & inclusive as permitted by the laws of the State of Florida, & that if any portion hereof is held invalid, it is agreed that the balance shall notwithstanding continue in full legal force & effect on a continuing basis from this date hereof.

IN WITNESS WHEREOF RELEASOR HAS EXECUTED THIS RELEASE FOR SHAG FEST 2024 IN JACKSONVILLE, FLORIDA TO BE HELD ON JUNE 27 - 29, 2024.

NAME #1(print) _____ SIGNATURE _____ DATE _____

NAME #2(print) _____ SIGNATURE _____ DATE _____

To reserve a table for 10, mail all registration forms and checks together. No reservations for less than 10. You must send in your registration form with signed waivers no matter the method of payment. Mail to: First Coast Shag Club, C/O Mona King, 920 River Road, Orange Park, FL, 32073

Club use:

Date Received: _____ Amount Received _____ Received By: _____ Check # _____