

Grand Ledge Chamber of Commerce
Holiday Parade 2010

Insurance Waivers

*Insurance Waiver Form Must Be Completed and Returned For Each
Participant Unit*

Group Name: _____

Vendor Number: _____

Contact Person(s):

Contact Person

Date: _____

I waive and release all rights and claims for damages against the Grand Ledge Chamber of Commerce for any damages or injuries, personal and property which may be suffered in connection to the Holiday Parade 2010 sponsored by the Grand Ledge Chamber of Commerce.

Signature (parent/guardian if minor)

Date

Please return registration application and insurance waiver forms to: Grand Ledge Area Chamber of Commerce, 222 S. Bridge Street, Grand Ledge, and Michigan 48837

For Information or Questions Call 517.627.2383 or Fax (517)627-9213
Deadline to Register – November 26, 2010

Safety is our first concern, so please cooperate with the volunteers in their effort to protect everyone concerned.