



KREWE of ST. ANDREWS MARDI GRAS KID'S PARADE 2021



General Release of Claims, Hold Harmless and Indemnification Agreement

In consideration of being permitted by the Krewe of St. Andrews, Inc. to participate in the St. Andrews Mardi Gras Parade (hereafter called "Kids' Parade"), I, individually and as the authorized representative of _____ (Krewe, organization, or business), release and discharge Krewe of St. Andrews, Inc. and/or any of its directors, officers, committee chairpersons, or members, now or in the future, of and from any and all claims, demands or suits for any injuries, death, property damage or loss occurring to me or my organization as a result of my participation or my organizations participation in the Kids' Parade, whether known or unknown, past, present or future. I further agree that my participation or my organization's participation in the Kids' Parade shall not be construed as an admission of liability or assumption of any responsibility by Krewe of St. Andrews, Inc. or any of its directors, officers, committee chairpersons, or members for any of my personal acts or omissions or those of my organization.

In addition, I agree to indemnify and hold harmless Krewe of St. Andrews, Inc. together with its directors, officers, committee chairpersons, or members, any other authorized participating Krewe, the City of Panama City and any of its personnel, all organizations and person(s) sponsoring, managing or in any other way participating in the Kids' Parade, inclusive of the Krewe of St. Andrews, Inc. of and from all claims, lawsuits, and/or causes of action, including but not limited to attorneys' fees and costs, in any way arising from my participation or my organization's participation in the Kids' Parade.

I understand and agree that this document covers all known, unknown or unforeseen claims and the consequences thereof.

I have read this document and fully understand its contents. I am aware that this is a release of liability and indemnification constitutes a contract between myself individually, the organization that I represent and the Krewe of St. Andrews, Inc. I am signing this of my own free will.

Printed Name of Representative of Organization _____

Signature of Representative of Organization

Date

Signature of Witness

Date

Please complete and return to Pam Wiggins at

pamelawiggins@comcast.net

or mail to

801 Pinecrest Ave. Panama City Fl. 32401

