WRHS Fighting Scouts Football presents C/O 2023 Graduation Bazaar Vendor Application

Name:
Address:
Phone: Email:
Graduation Arts & Crafts Bazaar - \$20/table – Limited Spots Bee Hółdzil Fighting Scouts Events Center – Heritage Hall
Check here which dates you are interested in: May 25, 2023 – 4pm to 7pm 8 Spots - TMS 8 th Promotion Payment: Payable to WRHS Football Club. Money orders only. NO CHECKS!
 WRUSD, Window Rock High School, staff or sponsors shall not be held responsible for any injuries, damage, theft, or loss of any property of any person before, during and after the C/O '23 Graduation Bazaar. Concession will be onsite. An application constitutes one (1) space. One white table and 2 chairs will be provided in Heritage Hall. No one is permitted to use other "OPEN" space. No Refunds of any entry fees – No exceptions. Masks are optional inside the Events Center. Registration will be closed when the maximum number of spots for each date is met. Tables can set up 30 minutes prior to time indicated above at the Bee Hółdzil Fighting Scouts Events Center Heritage Hall. Table is limited and based on a first come, first served basis. Payment for the table must be received. Battery operated power only. No negative campaigning or personal attacks will be allowed in any way shape or form. Includes calls to action will not be permitted. The Bazaar is to show support for WRHS Fighting Scouts, their clubs, and communities. Upon completion of the event, please ensure the area around your table is clean & all trash removed prior to leaving. Trash bags will be available at the registration table. Go Scouts! For more information or if you have any questions, please contact 928.729.6706 or contact@wrschool.net.
RISK, WAIVER AND IMAGE RELEASE FORM The undersigned hereby agrees to defend, indemnify, and hold harmless the Window Rock Unified School District and its board, employees, and agents from and against any and all loss, liability charges and expenses (including attorney fees) and cost which may arise by reason of participation in any program. (The District does not provide accident, medical, liability, workers' compensation insurance or any other insurance for program participants). As parent/guardian, I hereby consent to emergency treatment of my minor child as a result of accident or injury. I further agree to pay any and all costs incurred as a result of said treatment. I agree to carefully inspect and satisfy myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I agree to expressly assume the risk of participating in the premises. I understand the District retains the right to use photos taken during activities for publicity purposes. I acknowledge that my participation in this event, or that of my child, could involve the risk of physical injury or damage to property. I expressly assume such risk and release and waive any claims against the WRUSD, its agents are employees for any injuries to persons or damage to property. The WRUSD may use photos, film, videotape, or otherwise reproduce the image and/or voice of any person who participates in any program, class, or special event and use the same for any purpose without any payment. Your participation in any event or program constitutes your permission to use your likeness. Participant Signature: Date Date

Qs: 928.729.6706 or contact@wrschool.net

Date:_____

Office Use Only

Money Order#: