**RELEASE AND WAIVER OF LIABILITY for VENDORS**

This Release and Waiver of Liability is executed this \_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_,2024, by
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “Vendor”) in favor of City of Molena
and its directors, officers, employees, volunteers, and agents.
I, the Vendor, hereby freely and voluntarily, without duress, execute this Release under the following terms:
**Waiver and Release**
\_\_\_\_\_I hereby release and forever discharge and hold harmless City of Molena and its successors and assigns from any and all liability, claims, demands, and causes of action, of whatever kind of nature, either in law or equity, which may hereafter arise from my participation with the Big Foot Stomp Event and/or any project, activity, or event sponsored, managed, arranged, or promoted by, or otherwise affiliated or associated with City of Molena.
\_\_\_\_\_I understand and acknowledge that this Release discharges City of Molena from any liability or claim that I may have against City of Molena, with respect to any bodily or other injury, illness, death, or property damage that may result from my participation.

\_\_\_\_\_I also understand that City of Molena does not assume any responsibility or obligation to provide financial assistance or other assistance, including, but not limited to, medical, health, or disability insurance, in the event of injury, illness, death, or property damage.
\_\_\_\_\_I expressly understand and agree that this Release is intended to be as broad and inclusive as permitted by law, and that this Release shall be governed by and interpreted in accordance with the laws of this state, county, city and/or township. I agree that if any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release.

By signing below, I acknowledge that I have read and understand this Release and agree to its provisions.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Of Vendor Date

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Printed Name of Vendor

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Name Of Business