



Amador County Public Health

Together we can!

Health Fair

Saturday, September 21st from 11:00 a.m. – 2:00 p.m.
Italian Picnic Grounds



Participant Form

To reserve your booth space, **please return a completed Participant Form and Participant Liability Waiver (on the back of this form)** by mail or fax to (209)223-1562 or email to mharlan@amadorgov.org **by September 4, 2024**. Please note, space is limited and will be available on a first come, first serve basis.

Contact Information:

Name: _____ Title: _____

Name of Organization: _____

Mailing Address, City, Zip: _____

Phone: _____ Email: _____

Please describe the “health and wellness” focused activity your organization is planning in the space below:

Please be mindful of providing inclusive activities so that all members of our community may participate.

Event Instructions:

- Each organization will need to provide their own tables, chairs, and pop-up tent structure.
- Booth set-up will be permitted beginning at 9:00 a.m. on the day of the event. Please be ready for the event no later than 10:45 a.m.
- Event will be held “rain or shine.” Activities and booths will be moved indoors and/or under cover if inclement weather is expected.
- Clean up must occur directly after the event at 2:00 p.m.

We look forward to partnering with you to promote the health and wellness of our community.

Together we can!

Amador County Public Health
10877 Conductor Blvd., Suite 400
Sutter Creek, CA 95685

For questions or more information, please call Tracy Dehn at (209)223-6639 or Marcy Harlan at (209)223-6708.



PARTICIPANT LIABILITY WAIVER



THIS PARTICIPANT LIABILITY WAIVER (“Waiver”) is entered into effective as of the date of signature in consideration for you (“Releasor” or “Participant”) receiving permission to enter, participate, or otherwise make use of space (the “Event Space”) at the TOGETHER WE CAN – HEALTH FAIR (the “Event”) operated by the County of Amador, through its Department of Public Health (“Public Health”).

AGREEMENT

1. General Release. In consideration of Public Health’s granting me the right to use the Event Space, I, for myself, my employees, agents, representatives, and assigns, hereby release and hold harmless Public Health, its agents, board members, elected and appointed officials and officers, employees, volunteers and authorized representatives (“Releasees”), from all claims of negligence resulting in personal injury, accident, illness (including death) or property damage arising from or relating to my participation in the Event and use of the Event Space.

2. Assumption of Risk. In executing this release, I acknowledge that participation in the Event and use of the Event Space carries certain inherent dangers that cannot readily be eliminated regardless of the care taken to prevent and avoid injury, and hereby additionally assume the risk of liability for injury, accident, or illness, including death, resulting from such dangers. These dangers include, without limitation, heavy lifting, falling objects, exposure to hazardous materials or equipment, exposed wires, moving vehicles, and uneven footing, as well as general risks including, but not limited to slips, trips, falls, cuts, adverse weather conditions, falling trees or branches, and the acts or omissions of Market customers or vendors or other members of the public. I understand that the description of the risks in this Waiver is not complete and that other risks or events arising from participation in the Event or use of the Event Space, both known or unknown, anticipated or unanticipated, may result in serious bodily injury, death, or property damage.

3. Indemnification. I agree to indemnify and defend Releasees, through their own choice of counsel, against any and all claims arising out of or related to the negligent or intentional acts or omissions of myself, my employees, agents, representatives or assigns in connection with my participation in the Event or use of the Event Space, including any acts or omissions undertaken in contravention of Public Health’s Rules and Regulations.

4. Compliance with Laws. I agree to obey all laws, ordinances, rules and regulations adopted or established by Federal, State, or local governmental agencies or bodies while participating in the Event or using the Event Space.

5. Media Release. In further consideration for my use of the Event Space, I authorize Public Health the use of my likeness or identifying information in any publications or publicity materials, including but not limited to, books, internet and web content, newsletters, newspapers, and other means of advertising, without any compensation or fee being paid.

6. Choice of Law. I agree that any dispute concerning this Waiver will be governed by the laws of the State of California and that the exclusive venue for any dispute that may arise out of this Agreement will be in Amador County, California. If any clause or provision of this Waiver is held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision will not otherwise affect the remaining provisions of this Agreement, which will continue to be enforceable.

7. I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS WAIVER, I AM FREELY AND KNOWINGLY AGREEING TO ALL OF THE PROVISIONS OF THIS WAIVER, AND I UNDERSTAND AND AGREE TO BE BOUND BY THE TERMS OF THE WAIVER.

Participant Signature

Dated

Participant Print Name

Organization/Business Name