

# Vendor Liability Waiver

First Presbyterian Church – Third Annual Fall Festival

Event Date: Saturday, October 11, 2025

Location: 30410 TX-249, Tomball, TX 77375

## Acknowledgment of Risk & Liability Release

As a participating vendor/food truck (“Vendor”) in the Third Annual Fall Festival hosted by First Presbyterian Church (“Organizer”), I acknowledge and agree to the following terms:

### Assumption of Risk

I understand that participation in the event involves certain risks, including but not limited to injury, loss, theft, damage to personal or business property, and unforeseen weather conditions.

I voluntarily assume all risks associated with participation in this event.

### Release of Liability

I, on behalf of myself, my employees, volunteers, heirs, and representatives, hereby release, discharge, and hold harmless First Presbyterian Church, its staff, volunteers, and affiliates from any and all claims, liabilities, damages, losses, or expenses arising out of or in connection with my participation in the Fall Festival.

### Insurance & Permits

I acknowledge that I am solely responsible for obtaining and maintaining all required permits, licenses, insurance, and certifications necessary to operate my booth or food truck at this event.

### Indemnification

I agree to indemnify and defend First Presbyterian Church and its representatives against any claims, damages, or expenses (including legal fees) resulting from my actions, omissions, or participation in this event.

### Property & Safety

I understand that tents, tables, chairs, and other equipment are my responsibility to provide, secure, and maintain in a safe condition.

I acknowledge that the Organizer is not responsible for providing security for vendor property and will not be held liable for any theft or damage.

**Agreement & Signature**

I have read and understood the above waiver and agree to abide by all event rules and regulations. By signing below, I acknowledge that I am voluntarily giving up certain legal rights.

Vendor/Business Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_