

Registration Form



The first annual Nashville Fall Festival Car Show

Basic Information

First Name

Last Name

Phone Number

Email

Make/Year/Model

Nashville Fall Festival Car Show

Participant Waiver and Release of Liability

Event Date: October 19, 2025

Event Location: 8687 Old Harding Pike, Nashville, TN 37221

By signing below, I hereby acknowledge and agree to the following:

1. Assumption of Risk

I understand that participation in the Nashville Fall Festival Car Show ("Event") involves risks including, but not limited to, accidents, injuries, property damage, fire, theft, and other unforeseen incidents. I voluntarily assume all risks associated with participation.

2. Release of Liability

In consideration of being permitted to participate in the Event, I, on behalf of myself, my heirs, executors, administrators, and assigns, release and discharge the Nashville Fall Festival, its organizers, sponsors, volunteers, affiliates, and property owners from any and all liability, claims, demands, or causes of action for personal injury, illness, death, or damage to property that may arise out of or relate to my participation in the Event, whether caused by negligence or otherwise.

3. Vehicle Responsibility

I acknowledge that I am solely responsible for my vehicle and personal property during the Event. I agree to maintain appropriate insurance coverage for my vehicle.

4. Indemnification

I agree to indemnify and hold harmless the Nashville Fall Festival, its organizers, sponsors, volunteers, and affiliates against any claims, damages, costs, or expenses (including attorney's fees) arising from my actions or participation in the Event.

5. Media Release

I grant the Nashville Fall Festival and its representatives the right to photograph, film, or otherwise record my participation in the Event. I authorize the use of such media in promotional materials, social media, advertising, or publications without compensation.

6. Compliance with Rules

I agree to abide by all Event rules, regulations, and directions from Event staff and security personnel. Failure to comply may result in removal from the Event without refund.

Participant Information

- Name: _____
- Address: _____
- City/State/ZIP: _____
- Phone: _____
- Email: _____
- Vehicle Make/Model/Year: _____

Acknowledgment

I have read and fully understand this Waiver and Release of Liability. I voluntarily sign it and agree to be bound by its terms.

Signature: _____

Date: _____