# ■ Potato Hill Festival – Potato Gun Contest

# Hold Harmless & Liability Waiver

Event Location	n: Charleston Lake,	Charleston, Arkansas
Event Date: _		

## 1. Acknowledgment of Risk

I, the undersigned, acknowledge that participating in the Potato Hill Festival Potato Gun Contest ("the Event") involves inherent risks, including but not limited to: injury from handling, loading, or firing a potato gun; flying objects (potatoes) that may cause injury or property damage; exposure to noise, heat, or combustion fuels; and slips, trips, falls, or other hazards associated with an outdoor event. I understand these risks could result in minor or serious injury, permanent disability, or death.

## 2. Assumption of Risk

I voluntarily assume full responsibility for any risks, injuries, or damages I may sustain or cause during my participation in the Event, whether caused by the negligence of the organizers, other participants, or otherwise.

#### 3. Release & Hold Harmless

In consideration of being allowed to participate, I hereby release, waive, and hold harmless the Potato Hill Festival Committee, the City of Charleston, Arkansas, and all event sponsors, volunteers, and staff from any and all liability, claims, demands, actions, or causes of action arising out of or related to any loss, damage, or injury, including death, that may be sustained while participating in the Event.

### 4. Safety Compliance

I agree to use only approved fuels and equipment as outlined in the Contest Rules; wear safety eyewear during all loading and firing activities; follow all instructions from Event Officials immediately; submit my potato gun for inspection before use; and not consume alcohol or impairing substances before or during the Event. Failure to comply may result in disqualification and removal from the Event.

#### 5. Medical Authorization

In the event of injury, I authorize Event Officials to secure medical treatment deemed necessary, including transportation to a hospital, and I assume all associated costs.

## 6. Binding Effect

This release shall be binding on my heirs, executors, administrators, and assigns. If any portion is held invalid, the remainder shall continue in full force and effect.

Participant Name:	
Signature:	Date:
Parent/Guardian Name (if under 18):	
Signature:	Date:
Emergency Contact Name & Phone:	