



**MANITOWOC COUNTY FAIR (MCF)
JUNIOR AMATEUR TALENT COMPETITION
Medical Waiver and Release of Liability Form**

I, _____ (Participant's Name), agree to participate in the Manitowoc County Fair Amateur Talent Competition and I hereby release MCF, its board members, volunteers, and sponsors from any and all responsibility for injury or damages.

Performer/performer's guardian grants permission for MCF to use still photos and/or videos of their performance for promotion purposes.

I hereby release and hold harmless MCF and Manitowoc County, its board members, volunteers, and sponsors with respect to any and all injury, disability, death, or loss of damage to person or property, whether arising from the negligence of the releases or otherwise.

I authorize any representative of MCF to locate qualified and licensed medical personnel and/or transport of said performer to an appropriate medical facility in the event it may become necessary.

I have read this Medical Waiver and Release of Liability Form and fully understand its terms and understand that I have given up substantial rights by signing this form and I sign this form freely and voluntarily without any inducement.

If participant is under 18 parent/guardian must complete:

I/We _____ (parent/guardians) give permission for _____ (Name of Participant) to participate in the Manitowoc County Fair Junior Amateur Talent Competition.

Participant Signature

Parent/Guardian Signature (if under 18)

Email Address

Phone Number

Please Note: Both parent/guardian and participant (if under 18) must sign.

For additional information, please contact the Manitowoc County Expo Office at 920-683-4378 or by email at JennellKrizek@co.manitowoc.wi.us.