

# Event Registration & Release Form



Marion Chamber of Commerce  
13 Military Road / Marion AR 72364  
870-739-6041 / chamber@marionarchamber.org  
www.marionarchamber.org



Event: Spring on the Square Arts & Crafts Fair

Event Date: Sat., May 4, 2024 Event Location: Marion Courthouse Square

\*\*An alternate indoor venue is secured in case of rain.\*\*

Additional Event Information:

- 10' x 10' spaces available
- \$25 per booth space
- No electricity or water furnished

## SIGNED FORM MUST BE RECEIVED PRIOR TO EVENT

### General Release

The undersigned does hereby acknowledge the release and discharge of all actions, rights, causes of action, claims and demands whatsoever that now exist or hereafter accrue against the Marion Chamber of Commerce or the City of Marion and any and all consequences resulting from the undersigned's participation in the above referenced event.

The undersigned warrants that no promise or inducement has been offered except as herein set forth, that this Release is executed without reliance upon any statement or representation by the person or parties released or their representatives; that the undersigned is of legal age, is competent to execute this Release, and accepts full responsibility thereof, and;

The undersigned agrees, as a further consideration, that this Release shall apply to any accident, casualty, and/or occurrence in reference to said event, regardless of any fault on the part of the Marion Chamber of Commerce or the City of Marion or any of its members.

The undersigned understands that photographs, video and/or digital images may be taken of this event and its participants, and may be used in online and printed promotional materials and/or publications. By virtue of the attached signature, the undersigned gives consent to such images being taken and utilized in this manner without compensation.

The undersigned acknowledges responsibility for reporting and paying appropriate sales tax to the State of Arkansas.

Entries are subject to approval by the Marion Chamber of Commerce.

Registrant Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip

Phone #(s): \_\_\_\_\_

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

Facebook Listing (so we can tag you in our event posts): \_\_\_\_\_

Type of Booth: \_\_\_\_\_ Food > What type food? \_\_\_\_\_

\_\_\_\_\_ Craft > What type craft? \_\_\_\_\_

\_\_\_\_\_ Info Only > What type info? \_\_\_\_\_

\_\_\_\_\_ Other > Please specify \_\_\_\_\_

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date