



GarageMania Registration Form

Date: June 27, 2009

Location: Lakeside Legacy Arts Park
401 Country Club Road
Crystal Lake, IL 60014
(815)455-8000
www.lakesidelegacy.org

Event Information

Time: Set-Up 6:00 AM
Doors Open: 8:00 AM-4:00PM
Specifics:

10x10 Indoor Space- \$25.00
Participants must supply table(s) for display use.
6' and 8' tables are available for \$10.00 rental fee.
There are a limited # of tables, please request rentals
on application form.
Coffee, donuts and a light lunch will be available to purchase.

Please fill in the following information:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
Email: _____

Payment Option:

By Check:

Check # _____
Amount _____

Credit Card # _____
VISA ___ MC ___

Name: _____
Address: _____
City: _____
State: _____ Zip _____
Exp. _____ V Code _____
Signature: _____

of Rental Tables Requested: _____
(\$10 per table)

Total Amount enclosed: _____

Please check type of sale item: Garage _____ Craft _____

Participants are responsible for removal of any sale items/crafts not sold by the end of the day.
Garbage receptacles will be provided at the rear of the LLAP building.

All food wrappers, cups, napkins, soda cans or any set-up trash must be placed in trash containers located throughout the Sage Gallery and hallways and dumpster behind building.

Registration Waiver: Please sign and date the registration waiver.

Participation will be denied if the signature and date are not on this waiver

Registration Waiver:

Lakeside Legacy Arts Park Arts Park Waiver and Release of ALL Claims and Assumption of Risk.

Read this form carefully and be aware that in signing and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity.

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I/my Association may have (or accrue to me or my child/ward or I) as a result of participating in this program/activity against the Lakeside Legacy Arts Park.

I do hereby fully release and forever discharge the Lakeside Legacy Arts Park from any and all claims for injuries damages or loss that I may have or which any accrue to me or my Association and arising out of, connected with, or in any way associated with this program/activity.

I have read and fully understand the above important information, warning or risk, assumption of risk and waiver and release of all claims. If registering on-line or fax, your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Signature _____ **Date** _____