## HOLD HARMLESS AGREEMENT

Ü	, as a participant in the
(Name of Participant)	
(Name of Event)	held on (Date of Event)//20
(Address/Location of Event)	
Agree to use the dunking booth in exchange for donation t	to be made to the Porter Fire Department Ladies Auxiliary.
	adies Auxiliary harmless in the event of any injury sustained as ogram. This release includes, but is not limited to, such injuries ssions of other participants.
This is a complete and total release of the Porter Fire Department and all liability and shall be liberally construed in favor	
Witness Signature & Printed Name	Participant Signature
Witness Signature & Printed Name	Address of Participant
*Return completed form by mail or fax to:  Porter Fire Department Ladies Auxiliary	City, State, and Zip Code
23550 Loop 494  Porter, Texas 77365  Phone # (281) 354-6666  Fax # (281) 354-2043	(Area Code) Telephone
FOR OFFICE USE ONLY: Copy of T.D.L. & Insurance:	Date of Agreement
Dunking Booth Number:  Deposit Received: Ck#\$  Donation Received: Ck#\$  Dunking Booth Picked Up:  Dunking Booth Returned:  Notes:	12
Deposit Returned/Mailed:  Donation Deposited:	POTENTIA CONTRACTOR OF THE PROPERTY OF THE PRO