PO Box 299 317 W Zavala Street Crystal City, TX 78839



P: 830.374.3161
E: cctxspinachfestival@gmail.com
W: www.spinachfestival.org

Please email form to <a href="mailto:cctxspinachfestival@gmail.com">cctxspinachfestival@gmail.com</a> or hand-deliver to the Spinach Festival office by <a href="mailto:Thursday November 7th">Thursday November 7th</a>, 2024. Please check the category that best describes your entry in the Spinach Festival Parade.

Band Float	School Float	Marching Unit	General Entry
Contact Person:		Telephone No.:	
Contact Person Address:			
Organization Name:			
Organization Address:			
Group Name(If Applicable):			
Description:			
Number of Participants:	Will the entry have r	nusic? Yes: _	No:
Email Address(Required):			
RELEASE OF LIABILITY			
I/WE ACCEPT AND ASSUME ALL RIS DAMAGE AND/OR PERSONAL INJU CRYSTAL CITY FESTIVAL ASSOCIATI MY/OUR PARTICIPATION IN THIS EV	RY AND HEREBY RELEASE TH ION, INC. FROM LIABILITY ANI	E CITY OF CRYSTA	AL CITY AND THE
I HEREBY DECLARE THAT I AM IN CONDITION TO PARTICIPATE IN THE FULLY INDEMNIFY AND HOLD THE CITY AND ANYONE ELSE OR ENTIT MEMBERS HARMLESS FROM LIABILI PARTICIPATION IN THE ABOVE-MEN	HE SPINACH FESTIVAL PARADI CRYSTAL CITY FESTIVAL ASSO Y, ITS PREMISES, AGENTS EMPL ITY, DAMAGE OR COST THAT	E AND I FURTHER OCIATION, INC., CI OYEES, OFFICERS	. AGREE TO TY OF CRYSTAL & BOARD
THE UNDERSIGNED HAS READ AN AND COVENANT NOT TO SUE AND SPINACH FESTIVAL PARADE RULES.	D AGREE TO BE BOUND BY ITS	E RELEASE, WAIVEI S TERMS AND FOL	R OF LIABILITY LOW ALL
Signature		Date	