



FIRST RESPONDERS WING THROW DOWN APPLICATION

Thank you for service to the community. We are excited to have you be a part of our inaugural event this year. Please print legibly and fill out the application in its entirety. Space is limited and spaces will be filled on a first come-first served basis. You will be notified by email upon receipt of your application.

First Responder Unit Name: _____

Address: _____

Team Head Cook: _____

Phone: _____

Email: _____

City/State/Zip: _____

Team Member(s): _____

Registration is FREE

Teams may start setting up at 10:00 AM on Friday, August the 24th. Space must be dismantled and litter by 9:00 PM Friday night. **No Alcohol allowed on Park Property.**

Waiver of Liability: In consideration of your accepting this entry, I the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against New Holland Community Memorial Park, New Holland Summer Fest Committee, Kansas City Barbecue Society, or any individual or group responsible for the organization or management of New Holland Summer Fest. I hereby grant permission for New Holland Summer Fest Committee and or/ agents authorized by them, to use any photographs, videotapes, motion pictures, recordings and any other record of this event for any legitimate purpose. I agree to abide by the rules and regulations of New Holland Summer Fest, New Holland Community Memorial Park, and the Kansas City Barbecue Society (copies may be requested from KCBS).

Authorized Signature: _____ Date _____

Please Mail form to: Clair Witwer
238 Bender Road
Millersville, PA 17551