

Legence Bank

Registration Sheet for Flea Market Nashville TN

October 25, 2014

Please provide us with the following information:

Your Name _____

Your Home Address _____

Your Home Phone Number _____

Friend or Relative Who We Can Contact in an Emergency:

Name of Friend or Relative _____

Telephone Number of Friend or Relative _____

Name of Your Doctor _____

Do you have a special medical condition? _____ Yes _____ No

If so, please specify. _____

Please remit: \$50.00 _____

In consideration of services to be provided, namely the October 25, 2014 trip to the Flea Market in Nashville TN. The undersigned agrees to indemnify, hold and save harmless Legence Bank, its Directors and Staff from and against, all claims, losses, liabilities, judgements and demands of every nature on account of injury to, or death of, persons, or damage to, or loss of, property, caused by, or resulting in any manner from any acts or omissions, negligent or otherwise, Legence Bank, its agents or staff, in performing, or failing to perform any of the services, duties or operations to be performed by the said Legence Bank in connection with this event. The right to make any alterations, additions, or omissions in the program or schedule is reserved.

Registration fees are due at the time of sign-up and are non-refundable.

Signature of Participant

Date

Amount Paid