

# Scottish American Society of South Florida, Inc.

Southeast Florida Scottish Festival and Highland Games  
March 3, 2018

## CLAN PARTICIPATION AND REQUISITION FORM

Please mail this page with payment to:

SASSF  
c/o Ronald Wier  
2411 Bimini Lane  
Fort Lauderdale, FL 33312

For other clan questions contact: Ronald Wier (954) 584-8887  
Email: ron108@icloud.com

### CLANS/SOCIETY

Contact name:

Your title or Position Within The Clan:

Contact Phone Number with Area Code: (    )

Contact E-mail:

Address:

City, State, Zip:

ITEM	QUANTITY	COST	TOTAL
<b>CLAN PARTICIPATION:</b> (Includes canopy and space, one table, two chairs, two tickets, and one program)		\$95.00	\$
<b>SPACE ONLY</b>		\$ 25.00	\$
<b>ADDITIONAL TABLE(S)</b>		\$ 12.00	\$
<b>ADDITIONAL CHAIR(S)</b>		\$ 3.00	\$
<b>ADDITIONAL TICKET(S)</b>		\$ 15.00	\$
<b>CHILDREN AGES 6 TO 14</b>		\$ 3.00	\$
<b>CHILDREN UNDER 6 YEARS OLD</b>		FREE	FREE
		<b>GRAND TOTAL:</b>	

**SOUTHEAST FLORIDA SCOTTISH FESTIVAL AND HIGHLAND GAMES  
HOLD HARMLESS/WAIVER  
CLANS and SOCIETIES**

I, \_\_\_\_\_, will act as the Representative of  
(*print name*)

\_\_\_\_\_  
(*print clan name*)

at the SOUTHEAST FLORIDA SCOTTISH FESTIVAL AND HIGHLAND GAMES

I, the undersigned, do understand and agree that I will hold the said SCOTTISH AMERICAN SOCIETY OF SOUTH FLORIDA, INC. and its insurance carrier harmless in the event that I, personally, suffer any injury or accident during the performance of my duties as Representative. I also understand that this waiver applies ONLY to me personally and to any other Clan/Society member, or employee, who may be providing information within the confines of the clan tent area or to any member of the general public who may be injured or suffer an accident within this same area.

I agree that I will underwrite any medical costs or other cost related to my injury or accident personally, and/or in conjunction with my personal insurance carrier(s), and that in accordance with this waiver I will not file a claim against the SCOTTISH AMERICAN SOCIETY OF SOUTH FLORIDA, INC., or their insurance carrier at some later date for such injury or accident.

I acknowledge that this HOLD HARMLESS/WAIVER applies only to our activities within my clan space / canopy area / or society space. When I am attending other events or activities as members of the general public this HOLD HARMLESS/WAIVER will not be in force.

**Effective Date: March 2, 2018 and March 3, 2018**

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State, Zip*