

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Federal law requires that we report to the Internal Revenue Service amounts paid to you during the year for personal or contractual services, rentals, and other forms of payment if such payments Aggregate \$600.00 or more during the year. We are also required to include your Taxpayer Identification Number (TIN). If you fail to provide your TIN, we are required to withhold 20% of the amount payable to you. If you have been notified by the IRS that you are subject to backup withholding, we must withhold 20%. Please write your TIN below. Your TIN is your Social Security Number for individuals or sole Proprietors. For Partnerships, your TIN is your Employer Identification Number (EIN). Please write your TIN below. Your TIN is your Social Security Number for individuals or sole Proprietors. For partnerships, your TIN is your Employer Identification Number (EIN).

TIN: \_\_\_\_\_ SIGNED: \_\_\_\_\_

I certify that the above number is my correct Taxpayer Identification Number, and that I am not subject to backup withholding.

We are not required to report amounts paid to corporations. If you are incorporated, please write your corporate name below and sign where indicated.

CORPORATE NAME: \_\_\_\_\_

SIGNED: \_\_\_\_\_  
.....

INSURANCE RELEASE FORM

Insurance release for Saco Valley Woodsman's Field Day contestants including....contestant.....Jack and Jill partner  
Parents or Guardian for contestant under 18 years.

4. EACH OF THE UNDERSIGNED expressly acknowledges and agrees that the activities at the event and in the restricted areas are dangerous and involve the risk of serious injury and/or death and/or property damage. EACH OF THE UNDERSIGNED further expressly agree that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any position thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

This waiver, release and indemnification agreement specifically embraces each and every event sanctioned, authorized or promoted by said releasees during the entire season and applies to each and every event, or activity hereinabove mentioned, and has the same effect as if executed after each and every activity or event in which the undersigned participates so that the parties herein intended to be released and indemnified shall be fully and effectively released and indemnified as to each and every event hereinabove described.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Contestant)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Jack or Jill partner if not in any other events)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
( Parent or guardian if contestant is under 18 years.)