## 2023 TVE Volunteer Form

NAME:	
ADDRESS:	
CITY, STATE, ZIP:	
Phone #'s:	
Cell # Email Address:	
(Very important information)	
<u>Fees</u> \$25 per person = \$	
TOTALAMOUNT DUE \$	
Make checks payable to: TVE and mail with this application to P. O. Box 9047, Liberty, TX. 77575 or sign up online at www.tvefair.com	
# YEARS WITH TVE (Required please)	
AREAS I'M INTERESTED IN:  Current Committee(s) (if applicable)  Committee interested in 2023	
Release and Indemnity Agreement	
I/we,	XPOSITION, INC, and any other and assigns from and against any membership or in any way related threat thereby, the ownership and XY EXPOSITION, INC, with any event(s) past, present or future in y's fee), costs and other expenses its, demands, actions, or causes of
Thave had a full and adequate opportunity to be thoroughly advised of the terms and conditions of this release and indefinity a choosing. I have also been afforded the opportunity to ask any and all questions that I have concerning this document and its execut the terms of this agreement and do intentionally and voluntarily agree to same.	
Member's Signature	
Witness' Signature	