



TORRANCE ROSE FLOAT ASSOCIATION
3031 Torrance Blvd. Torrance, CA 90503
310-618-2425
DECORATOR FORM – 2018 ROSE PARADE FLOAT

Received _____
Bus <input type="checkbox"/>
Drive <input type="checkbox"/>
TRFA Only

Decorator's Name _____

Address: _____ City _____ Zip _____

Home Phone: _____ Cell Phone: _____

Email _____ Number of Years Decorating _____

EMERGENCY INFORMATION – EVERYONE NEEDS TO FILL THIS OUT
 Whom should we contact in case of an emergency?

Name: _____ Phone _____

Please initial all lines below that you have read and understand TRFA decorating policy

- _____ **DRY DAY Nov 25/Dec 2 –BUS LEAVES CITY ANNEX BUILDING 3031 TORRANCE BLVD. AT 7:45am**
- _____ DEC 26-30 Bus leaves Wilson Park at 7:45 am for the day shift and 4:45 pm for the night shift.
- _____ Buses will return at approximately 5:00pm and 11:00pm respectively
- _____ Buses may have to be canceled if we do not have at least 30 people per bus, you will be notified in advance of any cancelation
- _____ Decorators are assigned on a first come, first serve basis
- _____ Day shift - lunch will be provided, Night shift – snacks provided
- _____ Your shift could be canceled if the float is completed ahead of schedule
- _____ **Decorators must be a minimum of 13 years of age to decorate**
- _____ **Decorators must be a current member of the TRFA to decorate**

Dec 26 – 30 Bus leaves from Wilson Park – day shift at 7:45 am – night shift at 4:45 pm

Your confirmation will be mailed to you in December, unless you are working either Nov 25 or Dec 2

Parking is limited so we prefer decorators ride on the bus. If you plan to drive, please indicate here:

Decorator's Name (one form per decorator)	Adult	Under 18	Sat 11/25	Sat 12/2	Tue Dec 26		Wed Dec 27		Thurs Dec 28		Fri Dec 29		Sat Dec 30		Anytime	
					Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
Please print Last Name, First Name	✓	✓	Day	Day	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night

Please number your preferences. If you don't have a preference, please check the **anytime** box and we will schedule you where we need the most help. **Please note:** Those that choose to work on a **dry day**, 11/25 or 12/2 will be given **priority** for any additional decorating days selected. We will try to accommodate everyone's request, however there are no guarantees.

- **If you plan to decorate with someone and want to be scheduled at the same time, please list their name(s) here**

Photo/Video Release

By signing this release, I grant full permission to the City of Torrance and/or Torrance Rose Float Association (TRFA) to use my name and image in any photographs, video graphs, motion pictures, or recording for any publicity and promotion without obligation or liability to me.

Printed Name _____ Signature _____ Date _____

****Please return this form before December 1st, 2017****

**WAIVER AND RELEASE OF LIABILITY
2017 TORRANCE ROSE FLOAT**

I, THE UNDERSIGNED, CERTIFY THAT I AM IN GOOD PHYSICAL CONDITION AND WISH TO PARTICIPATE IN Torrance Rose Float Decorating Activities ("Decorating Activities") between November 25, 2017 and January 2, 2018.

I hereby acknowledge that I have voluntarily applied to participate in the Decorating Activities.

I am aware that serious accidents occasionally occur during Decorating Activities, and that participants occasionally sustain serious personal injury or death and/or property damage, as a consequence thereof. I understand that included among the dangerous elements of Decorating Activities are risks associated with the weather, discarded items (e.g., broken glass, nails, etc.), the use of tools, tripping, falling from ladders, and of injury as a result of tripping, falling, or striking an unknown object. I understand that in addition to the above-mentioned risks, there are unpredictable dangers involved in Decorating Activities. If, however, I observe any unusual and/or significant hazard I will immediately bring such to the attention of the nearest official or supervisor and remove myself from participation if necessary.

In consideration of my participation in Decorating Activities, I voluntarily release the City of Torrance, the Torrance Rose Float Association, and their respective officers, agents, employees, members, and volunteers from any and all liability for injuries or death or property damage resulting from or in any way connected with my participation in Decorating Activities, that this waiver and release is applicable even though the negligent activities of the City of Torrance, the Torrance Rose Float Association, their respective officers, agents, employees, members, and volunteers may have caused or contributed to the injury or death or property damage. This Waiver and Release is binding on my heirs and dependents as well as upon me. Additionally, this Waiver and Release applies to any injury, death, and/or property damage caused or allegedly caused by a dangerous condition of public property. I freely and voluntarily expressly assume all the risks of participating in Decorating Activities.

I represent that to the best of my knowledge that I have no medical, physical, and/or emotional health condition that would hinder or prevent my participation in Decorating Activities. I also certify that I am physically fit, have been sufficiently trained for participation in Decorating Activities and have not been advised otherwise by a qualified medical person. In the case of sickness, accident, or injury, the City of Torrance, the Torrance Rose Float Association and their respective officers, agents, employees, members, and volunteers have my express permission to secure, at my expense, such medical attention as is deemed necessary in the sole discretion of the City of Torrance, the Torrance Rose Float Association and their respective officers, agents, employees, members, and volunteers. This participation includes the administration of such medicines or treatment as might be administered or ordered by duly licensed medical personnel, except for

(list exceptions).

Print Name of Participant

Signature of Participant

IF PARTICIPANT IS UNDER 18, A PARENT OR LEGAL GUARDIAN MUST SIGN.
THE ABOVE PARTICIPANT HAS MY PERMISSION TO PARTICIPATE IN DECORATING ACTIVITIES.

These activities include travel to Irwindale, the site of the City of Torrance's float, by transportation provided by the Torrance Rose Float Association as a decorator on the Torrance Rose Parade float. I understand the transportation will depart from and return to Wilson Park, 2200 Crenshaw Blvd. (Please use the northwest parking lot at Crenshaw and Jefferson.) All day buses will leave at 7:45 am and will return at 5:00 pm. All night buses will board at 4:45 pm and will return at 11 pm. PLEASE BE PROMPT!!!! (The bus won't wait☺).

I agree that should a discipline problem concerning the participant arise on a bus or at the decorating site, I or the person listed for emergency notification will drive to the decorating site in Irwindale to pick up the participant. Neither the City of Torrance, the Torrance Rose Float Association, nor their respective officers, agents, employees, members, and volunteers will be held liable for any expenses incurred.

I HAVE READ AND AGREE TO THE PROVISIONS STATED ABOVE. I KNOW OF NO HEALTH LIMITATIONS THAT MAY RESTRICT THIS VOLUNTEER'S PARTICIPATION IN THIS ACTIVITY.

Print Name of Parent or Legal Guardian
[97979_1.DOC]

Signature of Parent or Legal Guardian

Date
[97979_1.DOC]

****Please return this form before December 1, 2017****