



# 2025 SCRC FLORIDA STATE RALLY

## VENDOR REGISTRATION



**VENDOR/BUSINESS NAME:** \_\_\_\_\_

**CONTACT NAME/TITLE:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **CELL#:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**WEBSITE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**PRODUCT/SERVICE DESCRIPTION:** \_\_\_\_\_

**VENDOR FEE:** (choose one)

- \$75 Cash       \$75 Valued In-Kind Donation: \_\_\_\_\_

**ONSITE PLAN/SCHEDULE:**

- Thursday April 10      Start Time: \_\_\_\_\_ to End Time: \_\_\_\_\_  
 Friday April 11      Start Time: \_\_\_\_\_ to End Time: \_\_\_\_\_  
 Saturday April 12      Start Time: \_\_\_\_\_ to End Time: \_\_\_\_\_

**REQUIREMENTS/NEEDS** (i.e., water, electric, etc.): \_\_\_\_\_

### WAIVER AND RELEASE OF LIABILITY

In consideration of 2025 SCRC FLORIDA STATE RALLY; furnishing services, location and/or equipment to enable me to participate as a VENDOR, I agree as follows: I, on behalf of myself, my business, personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify 2025 SCRC FLORIDA STATE RALLY; and its owners, agents, officers and volunteers from any and all claims, suits or causes of action for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation as a VENDOR in the 2025 SCRC FLORIDA STATE RALLY activities. I specifically understand that I am releasing, discharging, and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by 2025 SCRC FLORIDA STATE RALLY, and its owners, agents, officers or volunteers.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING THIS VENDOR REGISTRATION, I AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE; 2025 SCRC FLORIDA STATE RALLY; FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, LOSS OF PRODUCT OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

### AUTHORIZED VENDOR REPRESENTATIVE

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Please send completed forms to:  
**Victor J. Mercado, 20425 NW 175th Ave, High Springs, FL 32643**  
Email: [vmercado32605@gmail.com](mailto:vmercado32605@gmail.com)