Schipperke Club of America, Inc.

LIABILITY WAIVER FORM

I, _____, agree to take part in the 2027 SCA National Specialty to be held in Topeka, Kansas on April 17–22, 2027 at the Hotel Topeka at City Center, 1717 SW Topeka Blvd., Topeka, KS 66612.

As a vendor at this event, I understand that this activity involves certain risks, including but not limited to personal physical injury and loss of damage to property.

By signing this form, I agree to the following:

- I accept full responsibility for any injuries or damages that may happen to me or my merchandise during this event.
- I confirm that I am participating willingly and that I am aware of the risks involved. I understand that this waiver means I give up my right to sue the Schipperke Club of America, Inc. for any reason connected to this event.
- I will not hold the Schipperke Club of America, Inc. or its officers, club official or committee members responsible for any injuries, accident or damages that may occur.

Printed Name of Vendor: _____

DBA: _____

_____

Signature Date

Please sign and date this agreement and return it to me by April 1, 2027, either by email or the postal service.

Sincerely,

Beverly Henry, 2027 SCA National Specialty Chair
1129 Lake Bluff Drive
Little Elm, Texas, 75068
214-728-6522
chestara@yahoo.com