



Fred Oldfield's
WESTERN HERITAGE & ART CENTER



Paint Party Registration Form

Name of Birthday Child: _____ Birthday: _____

Parent/Guardian's Name: _____

Phone number: _____ E-mail address: _____

Approx. how many painters: _____ Approx age range: _____

1st choice of date: _____ 1st choice of time: _____ 2nd choice of time: _____

2nd choice of date: _____ 1st choice of time: _____ 2nd choice of time: _____

Painting theme of choice (we'd be happy to make suggestions if you like): _____

Any other comments/questions/requests:

_____ herein referred to as Parent/Guardian will indemnify THE FRED OLDFIELD WESTERN HERITAGE CENTER, JOELLA OLDFIELD, KARRIE NEVIN, FRED OLDFIELD, STAFF, & THE WESTERN WASHINGTON FAIR, ITS OFFICERS, DIRECTORS, AGENTS & EMPLOYEES save it harmless from and against any and all claims, actions, damages, liability and expense in connection with loss of life, personal injury and/or damages to property arising from and out of any occurrence in, and upon or at the leased premises including the parking lot or any property adjoining the premises occasioned wholly or in part by any act of omission of exhibitor or its agents, contractors and employees. Also the Parent/Guardian will accept responsibility for any damages that occur to the Artwork, Artifacts or Center property during the Paint Party Event.

Signed _____ Date: _____

Please e-mail completed form to oldfieldheritageartcenter@gmail.com