

## **Vendor Form**

Company Name:	
Participant's Name:	
Phone:	
(Business) Address:	(Home/Cell)
E-mail:	
	able to: Spring Tri-Club, P.O. Box 162, Spring, (832) 605-4693 brittany_graff@yahoo.com or or1@springisd.org.
participation in the Spring Livestock Show.	ulations must be adhered to as a condition of The 2026 Show will be held April 9-11, 2026 d Special: Sign up before January 31, 2026 and
neat, clean and free of trash. Smoking is not No Refunds. This is a school event and no nuisance or not in good taste will not be solo	chairs, and tents. Storage areas must be kept allowed on Spring ISD property. Rain or Shine, ovelty item(s) that the Committee decides is a d. Spring Tri-Club reserves the right to refuse y set up Thursday, April 9, 2026 (Electricity
hereby release and discharge Spring Tri-Clu from any and all claims, causes of action, s damage of property/goods, or death, accrued, relating to or arising out of any negligent, gro	yed as a Vendor at the Spring Livestock Shown ab, Spring ISD, and their legal representatives outs, or demands for personal injury, stolen or or to accrue, in the future, known or unknown, ossly negligent, and/or intentional acts on part of with participation as a Vendor. I have read the
Participant Signature	Date
Space #:	