



DragonFest

Fall Festival & Jog-a-thon

October 6th, 2018

11am – 3pm

Bring the family for an afternoon of Fall Fun

Grab lunch at the Concession Stand or from Beef It Up Catering

Get a sweet treat from the Bake Table

Jog-a-thon will have two times for each age group and adults too!

Race Times as follows:

12pm or 2pm Kindergarten and 1st grade

12:15 or 2:15 2nd and 3rd grades

12:30 or 2:30 4th and 5th grades

12:45 or 2:45 Adult run

MAKE A DRAGON CRAFT

Obstacle Course and Giant Twister Game open at 11am

Cornhole Tournament begins at **12:30pm**

Please visit <https://www.fdepta.org/> for forms, information, and online payment!!

Prize/Sponsor Levels

\$10 – Wristband for Jogathon and Obstacle Course

\$25 – Swag Bag and FDES Dragon decal

\$50 – FDES Blanket



\$75 – DragonFest Long Sleeve T-Shirt

\$100 – Entry into raffle for \$50 Dicks Sporting Goods Certificate (2 winners)



\$125 – Entry into raffle for Breakout Room gift certificate (2 winners)

BREAKOUT

**each sponsor level includes all prizes of lesser sponsor levels*

FALL
MARKETPLACE
PUMPKINS
VARIOUS
VENDORS

Please contact clish0412@yahoo.com or Suziford9@gmail.com with any questions

2nd Annual DragonFest




Adult Bracket - \$30/team

1st place: Set of Cornhole Boards

Gift Certificates to B.C. Brewing Company



2nd place: Basket of Cheer

Gift Certificates to  LunaZul

Begins at 12:30pm

Kids Bracket - \$10/team

Top 2 teams will get to have lunch with Mr. Scott

Begins at 1 pm

You can register online by going to the PTA store or send this form in with payment.

Cornhole Tournament Registration

____ Adult Bracket

____ Kids Bracket

Team Member 1: _____ Email: _____

Team Member 2: _____ Email: _____

Extra Wristbands_____



Maryland State PTA
5 Central Avenue
Glen Bernie, MD 21061



DragonFest Jog-a-thon & Fall Festival - Minor(s) Participation Waiver

The undersigned parent(s) or guardian(s) assume all risks in connection with the participation of all individuals listed above in any and all of the PTA sponsored activities.

I attest and verify that all individuals listed above are physically fit and able to participate in any PTA sponsored activities. Further I acknowledge that it is my responsibility to understand any inherent risks associated with PTA sponsored activities and communicate those risks to all individuals named above.

I do hereby certify that to the best of my knowledge and belief all individuals named above are in good health. In the event that I, or other parent/guardian, cannot be reached in an emergency, I hereby give permission to secure proper treatment for my child(ren). I/we do hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon or dentist and performed by or under the supervision of the medical staff of the hospital or facility furnishing medical or dental services. It is further understood that the undersigned will assume full responsibility for any such action, including payment of costs.

I/we, as parent(s) or guardian(s) of the minor(s), do hereby, for my child/children, myself, my heirs, executors and administrators, release and forever discharge and hold harmless the Maryland State PTA, the local PTA and all officers, directors, employees, agents and volunteers of the organizations, acting officially or otherwise, from any and all claims, demands, actions or causes of action which in any way arise from the participation of any individuals listed above in any PTA sponsored activities.

By signing below, I confirm that I have carefully read and fully understand its contents. I am aware that this is a release of liability and signed it of my own free will.

I/we hereby advise that the below named minor(s) has the following allergies, medicine reactions or unusual physical conditions, which should be made known to a treating physician: (If none, please write the word "none". If yes, put first name of child and the allergy/condition.):

Please print the names of all minors participating in this event:

Name of Minor

Allergy/Asthma/Medical Condition or None

Name of Minor

Allergy/Asthma/Medical Condition or None

Name of Minor

Allergy/Asthma/Medical Condition or None

Parent/Guardian/Participant Signature

Print Name

Street Address

City

State

Zip

Phone



MARYLAND STATE PTA
5 Central Avenue
Glen Burnie, MD 21061-3441

DRAGONFEST 2018 JOGATHON ADULT PARTICIPANT'S WAIVER

In the consideration of the acceptance of my entry in the

FIFTH DISTRICT ELEMENTARY PTA of Upperco, MD DRAGONFEST JOGATHON

Date of Event: October 6th, 2018

Name of Event: DRAGONFEST JOGATHON

_____ I the undersigned participant, intending to be legally bound, do hereby for myself and heirs, executors, administrators and assigns, forever waive, release and discharge any and all rights, claims and actions for damages that I may have, or that may hereafter accrue to me against the Maryland PTA including all units and councils, and all of their officers, directors, members and volunteers.

I attest and verify that I am mentally & physically fit and able to participate in this event and acknowledge that I am aware of the inherent risks in participating in an athletic event of this type.

_____ Signature and Date

_____ Print Name

_____ Address

_____ City

_____ Phone



Vendor Registration Form

Fifth District Elementary School DragonFest Fall Festival Marketplace

*Saturday, October 6th 2018
11a-3pm*

Description of Event:

- Outdoor event with Jog-a-thon, Obstacle Course, Giant Twister Game, & other kids activities, Cornhole Tournament, Bake Table, Fall market, Concessions & vendors

Contact Person: Susan Harris – cell- 443-243-5876 or clish0412@yahoo.com

Vendor Information and Requirements: *Please read carefully*

- Spaces are 12' x 6'. In lieu of a vendor fee, each vendor is asked to donate **10% of their sales** from the event to the FDES PTA in addition to an **item valued at \$25** or more that will be used as a prize at FDES Bingo Night in December. Donated item & proceeds are expected at end of the event.
- Only one vendor for each Direct Sales Company will be accepted (i.e. 31, Lularoe, etc...)
- Vendor space is limited and available on a first come, first served basis
- You must provide your own table, etc.
- Please provide a detailed description of your items on the form
- All vendors must check-in between 9:30-10:30am. Due to safety issues, arrivals after 11:30am may forfeit pre-assigned booth location and be assigned an alternate location
- Booths must be completely set-up by 11am. The DragonFest Committee requests that all vendor booths remain open until 3pm
- Vendors will have from 3-4pm to pack-up. All vendors must be off school grounds by 4pm
- The vendor is responsible for leaving the vendor area in the condition that it was originally received, i.e. removal of all debris such as boxes and trash.
- Each applicant will receive a confirmation email upon receipt of their application
- There is no rain date for this event.
- All vendor fees are non-refundable.
- All vendors are required to read and sign attached waiver. Please fill out vendor registration completely.

Fifth District PTA DragonFest Fall Festival

Vendor Registration Form

Saturday, October 6th, 2018

Vendor Name:

Contact:

Address:

City:

State:

Zip:

E-mail:

Phone(s):

REQUIRED DONATED Item (\$25+):

By signing below you agree to donate 10% of your sales from the DragonFest event to Fifth District PTA. No show vendors will be charged a breach of commitment fee of \$25.

Date: _____

Type of Booth & Description: Please indicate type of product/items or service and provide description, photos.

Waiver: The Fifth District PTA reserves the right to refuse any vendor application, should this occur the fee will be refunded. The Vendor shall defend, save and hold harmless the Fifth District PTA, Fifth District Elementary School, Baltimore County Public Schools, their respective officers, agents, board members, staff, volunteers, sponsors and assigns from any claims, damages, losses, liability or expense which may arise, and shall not be held responsible for any loss or damage due to fire, accident, theft, weather, acts of God, vandalism or any other loss or injury whatsoever or not specifically described herein, whether past, present or future. Booths are not insured by the Fifth District PTA, Fifth District Elementary School, Baltimore County Public Schools, or any sponsoring agents. Exhibitors must make provisions for safeguarding their goods. Exhibitor must have replacement cost insurance for all personal property. Exhibitor assumes full liability for protecting, care and maintenance of exhibitor's property. **ANY VENDOR NOT HOLDING VALID LIABILITY INSURANCE EXHIBITS AT THEIR OWN RISK AND ASSUMES ALL LIABILITY.**

Please sign to acknowledge that you have read all of the information, rules and regulations and agree to be bound by this contract.

Signed:

Date:

RESERVATIONS CAN BE EMAILED TO: clish0412@yahoo.com