

**Seattle Festa Italiana, Tutta Bella Grape Stomp  
Application & Waiver Release**

I, the undersigned, attest and verify that I am physically fit and have full knowledge of the risks involved. I have read the entry information and rules and certify by my signature my compliance. I hereby release Festa Italiana, Seattle Center, the City of Seattle, Tutta Bella Neapolitan Pizzeria and any and all individuals or companies associated with the event from responsibility for any injuries or damages I may suffer as a result of my participation in the Festa Seattle Italiana Grape Stomp.

Team Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Affiliation or Sponsor: \_\_\_\_\_

**TEAM MEMBERS**

**Player #1** Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Tee Shirt Size: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Player #2** Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Tee Shirt Size: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Player #3** Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Tee Shirt Size: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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***Return this completed application (including signature from each team member for release) and a \$30 entry fee made out to Festa Italiana to:***

**Tony La Stella  
Festa Grape Stomp  
14323 - 64th Ave W.  
Edmonds, WA 98026  
FAX: (425) 743-5010**

Teams will be scheduled on a first-come, first-served basis upon receipt of completed application and entry fee.  
**Good Luck and May The Best Feet Win!**