

Warrior's Society



Entrance Form and Waiver

First Name: Last Name:

Street Address:

City: State: Zip:

Telephone: E-mail Address:

Emergency Contact: (must have) Phone:

Registration fee: \$85.00 per participant

Solo: Solo male Solo female Skill Level: Expert Intermediate Novice

Team: 2-person team 5-person team 5-person single speed Corporate (6-10 members) All male All female Coed Team name:

Team volunteer: (each team must provide an event volunteer)

Age: 16 and under 17 to 30 31 to 45 36 to 45 46 and up

T-shirt size: (choose one) S M L XL XXL XXXL

- Each team member must fill out an entrance form... The entry fee includes a T-shirt, lunch... Make checks payable to: Warrior's Society...

WAIVER AND RELEASE FROM LIABILITY

I fully acknowledge that mountain biking is a hazardous activity and that this event carries with it the potential for death, serious injury, property damage and property loss. I hereby assume all the risks of participating in this event regardless of their cause. I certify that I am physically fit, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person. In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin successors and assigns as follows:

- (A) Waive, Release and Forever Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or any actions of any kind which may hereafter accrue to me from this event... (B) I acknowledge that the use of a hard-shell riding helmet is required... (C) I hereby consent to receive medical treatment which may be deemed advisable during this event... (D) I agree that my entrance fee will not be refunded unless I notify Chris Vargas... (E) I will additionally permit free use of my name and pictures in broadcasts, print and television, etc.

Participant Signature Age Sex Date

Parent or Legal Guardian Date

Parent or Legal Guardian must sign IF APPLICANT IS UNDER 18 YEARS, which authorizes emergency medical treatment for minor.