

TOWN OF ERWIN

Registration

NAME	DATE OF BIRTH	
ADDRESS		(Ti.)
(Street)	(City)	(Zip)
PHONE NUMBER	EMAIL ADDRESS	

WARNING, LIABILITY, RELEASE AND ACKNOWLEDGMENT AND ASSUMPTION OF RISK

I understand that participation in this recreational program involves risk of injury. These risks include dehydration, exhaustion, fainting, sprained ankles, foot/leg soreness, etc. I further understand that before participating in this program I should consult a physician for advice. By signing this form I acknowledge all risks of injury and death and affirm that I am willing to assume responsibility should injury or death result from them. I also agree to follow all rules and procedures of the program and to follow the reasonable instructions of supervisors of the program. Furthermore, in return for the opportunity to participate in this program, I agree for myself, and for my heirs, assigns, executors and administrators to waive any legal rights I may have to seek payment of any kind from the Town of Erwin, its employees or its agents for bodily injury or death resulting from this program and to release those parties from any liability for damages resulting from my injuries or death. This waiver and release applies to injuries from all causes and includes all payments or legal remedies I might be entitled to from the Town of Erwin, its employees or its agents. I also understand that no insurance coverage is provided by the Town of Erwin.

(Participant Signature)	

Registration Deadline: March 1st, 2017 at 5 PM