## Portage Skate Park Levee Cruise, Portage, WI

Event date: Saturday Levee Cruise Registration Form
September 10th Event starts at 10:30 plan to arrive no later than 10 to register
INSTRUCTIONS: Please sign and return this form with \$20.00 entry fee by:

Pre-registration deadline August 16th 2016

staff liable.

Trease sign and retain this form with \$20.00 citely fee b	Plea	se select t-shirt size if pre-registering
NOTICE: If this form is not returned by the above deadline participant will not rec	ceive a t-shirt.	S M L XL
Please verify that all of the following informatio	n is correct.	
Emergency contact: Telephon	ne Number: (	) -
Personal Information: First Name:Last Name:		
Telephone Number:( ) - Address: .		
Gender: Age: City: State:		
Checks should be made out to: Kyle Little-Portage Family Skate Park Please	put Marathon in	the memo space.
Registration received after August16th 2016will b Mail Registration forms and payment to: PFSP Marathon 327 Rive		
EVENT WAIVER		
By signing below, I acknowledge my understanding that my participation in the 2016 Portage Skate or post-event activities (the race and pre/post-event activities are individually and collectively referre that it potentially may be hazardous. I attest and verify that I am physically fit and have sufficiently physical fitness to participate in the Event has been verified by a licensed medical doctor. I expressly the Event, including but not limited to: loss of or damage to my property; injury (including death); as may vary widely, and that may include uneven and/or slippery surfaces, unpredictable spectators/par without limitation, vehicles, security barriers, signs, cables, mats, and debris on the course); and the or canceled altogether by Event or government officials.	ed to as the "Event trained for the Eve y assume all known ccidents; the effec ticipants, and natu	") involves rigorous physical activity and ent and that, if appropriate, my n and unknown risks associated with ts of weather; terrain conditions that iral and man-made obstacles (including
In consideration of my participation in the Event, I, for myself, my heirs, executors, administrators, p and release any and all rights, claims and causes of action I have or may have against any Race Organ participation in the Event; and (b) agree to indemnify, defend, and hold harmless all Event Organizer action, liabilities, damages, expenses (including attorney's fees and court costs) or claims (collective my participation in the Event and/or the condition of the course, property, facilities or equipment use arise including, without limitation, Claims relating to (i) theft, loss or disappearance of property, (ii) damage, for all claims and losses (including attorney's fees and court costs), which may be brought a have been injured or otherwise to have suffered loss or damage as a result of my participation in the associated with the Portage Skate Park Project all governmental agencies representing the territory in Resources (such as, without limitation, fire, police and ambulance personnel), medical personnel, vo	nizer (as defined by rs from and agains by, "Claims") that ed for the Event, re bodily injury (incur- against any one or Event. For these party which the Event	below) that may arise as a result of my it any and all injuries, losses, causes of might arise directly or indirectly from egardless of when such Claim may luding fatality), and (iii) property more of them by anyone claiming to urposes, an "Event Organizer" is any one will be held and from which
I further grant full permission to any and all Event Organizers to store, use, reproduce and/or resell in technique (including electronic/digital) now in existence or hereafter invented, for any legitimate pur purposes. I understand and agree that information about me that is collected by the Event Organizers application this form, and my Event results, and any and all medical information that I may disclose parties for any legitimate purpose, including research, commercial sales, and marketing purposes, an recipient(s). I also grant the Event medical personnel and their respective agents and designees acceauthorize medical treatment as needed. I acknowledge and agree to abide by any Official Rules for the Event's website or otherwise communicated to me verbally or in writing at the Event by Event official age or older or, if applicable, that I am the parent or legal guardian of the child under the age of 18 years the full power and authority to agree to these terms on behalf of such child, and to bind him/her.  X. Signature of Participant	rpose, including or s, including withou to Event medical p d that it may be su ess to all medical r the Event that may ials. I hereby repre- vears old who I am	ommercial sales and marketing at limitation information in the personnel, may be disclosed to third object to re-disclosure by the ecords (and physicians) as needed and be posted at the Event or on the sent and warrant that I am 18 years of registering for the Event and that I  By signing this waiver:  I (parent or legal guardian)
x		give event staff permission to call emergency services i
Signature and printed name of parent or legal guardian-For participants under 18 years of a	age Date	necessary and not hold said