## **Bay Area Orienteering Club Event Entry Form**

Name(s)				O' Club
Please Print (Enter names of all me	embers of group. Use	a separate form for each	group running separately.)	
Non-Member: Email addre	ess(es)			
How did you	u hear about the	e event?		
REQUIRED SAFETY II	NFO: Car Make	/Color/License	Phone	e#
CHECK IN AT THE FINIS	H BY 2 PM!!!	(Failure to do so	may result in a searcl	h and rescue effort.)
BEGINNER'S COURSE: V	Vhite, Yellow (c	circle one)		
Per-Person Fee		Adults @ \$8 / _	Juniors @ <b>\$3</b> = <b>\$</b>	
INTERMEDIATE/ADVANC	ED COURSE: (	Orange, Brown, G	reen, Red, Blue (circle o	one)
Per-Person Fee	. Member	Adults @ <b>\$15</b> / _	Juniors @ <b>\$5</b> = <b>\$</b>	
	Non-Member _	Adults @ <b>\$20</b> / _	Juniors @ <b>\$5</b> = <b>\$</b>	
EQUIPMENT RENTALS:	E-stick(*)		@ \$5 = \$	
			@ \$1 = \$	
BAOC MEMBERSHIP:			\$30,) = \$	
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Release and Waiver of Liabil	lity, Assumption	of Risk, and Indem		<u> </u>
In consideration of being permitte personal representatives, assigns				s, I and/or my minor child, our
Acknowledge that there are risk conditions to be unsafe, I will imm injuries, or in extreme circumstance	ediately discontinue			
2. Understand that the risks associant in action of others participating in taccept all such risks and responsi	he activity and that	there may be other risl	ks either not known to me or r	not readily foreseeable. I fully
3. Hereby accept and assume all or death, even if caused in whole them harmless;				
4. Have read this agreement, fully signed it freely without the induce liability to the greatest extent allow notwithstanding, shall continue in	ment or assurance ved by law, and agr	of any nature, and inter ree that if any portion of	nd it to be a complete and und	conditional release of all
(*) E-stick Rental Agreement: I			nd of the event. In the event of the event o	
Signatures(s) of All Entra	nt(s) (parent if	minor)		Date
Signature			Date	
Signature			Date	
Signature			Date	

## WAIVER, RELEASE AND ASSUMPTION OF RISK AGREEMENT AND AUTHORIZATION FOR EMERGENCY TREATMENT OR TRANSPORTATION

I understand and agree that this athletic event will test physical and mental limits and there is the possibility that I may suffer property loss, serious injury or death. This could be caused by the terrain, facilities, trail conditions and/or traffic on the roads and trails. This could also be caused by the actions of other people include in but not limited to participants, volunteers, spectators, event producers, course monitors, members of theBay Area Orienteering Club, and East Bay Regional Park District employees, directors and or volunteers. I HEREBY FREELY AND VOLUNTARILY ASSUME ALL RISKS OF PARTICIPATING IN THIS EVENT(Initial)
I certify that I am physically fit, have trained and prepared to participate in this event. I have not been advised not to participate by a qualified medical person.
I understand that this accident Waiver and release of Liability (AWRL) will be used by the <b>_Bay Area Orienteering Club</b> _, the event sponsor, the East Bay Regional Park District, and everyone involved in putting on the event in which I am participating and that it will govern my actions and responsibilities at the event.
For considering my application and permitting me to participate in this event, I agree and in doing so bind my executors, administrators, heirs, next of kin, successors to: (A) Irrevocably and forever Waive, Release and Discharge from any and all claims and liability for my death, disability, personal injury, property damage, property theft or actions of any kind nature or description which may happen to me while traveling to or from the event or while participating in the event, the _ Bay Area Orienteering Club, the East Bay Regional Park District, its directors, employees, agents, volunteers, and other event participants; (B) Indemnify, Defend and Hold Harmless the individuals and entities mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.
I hereby consent to receive medical treatment which may be deemed advisable in the event of accident, injury and/or illness to me during this event (Initial)
I understand that this event or related activities may be filmed and I may be photographed before, during or after this event. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns.
This AWRL will be interpreted broadly to provide a release and waiver to the maximum extent permissible under the law.
I HAVE CAREFULLY READ THIS AWRL AND FULLY UNDERSTAND AND APPRECIATE ITS CONTENTS. I AM AWARE THAT THIS IS A WAIVER OF RIGHTS AND A RELEASE OF LIABILITY AND IS A CONTRACT BETWEEN MYSELF AND THE EVENT SPONSOR, ORGANIZER, AND THE EAST BAY REGIONAL PARK DISTRICT, AND I SIGN IT OF MY OWN FREE WILL.
NameAge
SignatureDate
If the applicant is under 18 years of age, the parents or guardians must execute the following waiver on the applicants behalf.
PARENT/GUARDIAN WAIVER FOR MINORS The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to defend, save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of both the minor and the parents or legal guardian.
Parent or Legal Guardian
Signature
Date