

June 6 - 8, 2008!!

# Wailers River Bash!! 2008

## Registration Form

Mail to: Money Boss, P.O. Box 257, Glendale, CA 91209

Be sure to complete **both pages** and mail with payment. Make checks payable to  
Wailers Ski Club. Do not send cash!

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Member of \_\_\_\_\_ Club Referred By: \_\_\_\_\_

Also paying for \_\_\_\_\_

	Number of Adults _____	Minors _____
\$99 before May 30th		
\$119 after May 30th		
X number of attendees _____	=	_____
<b>Accommodations:</b>		
<input type="checkbox"/> -RV/Camper <input type="checkbox"/> -Tenting <input type="checkbox"/> -Off-site <input type="checkbox"/> -Other		
<b>Boat activity:</b>		
<input type="checkbox"/> -Skier <input type="checkbox"/> -Wakeboarder <input type="checkbox"/> -Tuber/Other <input type="checkbox"/> -N/A		
<b>Food Choice:</b>		
<input type="checkbox"/> -Chicken <input type="checkbox"/> -Steak <input type="checkbox"/> -Other/None		

### Contact Info:

Pete Smith, Big Boss (909) 626-6507 [bigboss@wailersskiclub.org](mailto:bigboss@wailersskiclub.org)

Brandy Little, Money Boss (626) 818-8533 [moneyboss@wailersskiclub.org](mailto:moneyboss@wailersskiclub.org)



[www.wailersskiclub.org/bash](http://www.wailersskiclub.org/bash)

For Administration Purposes Only

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_ Amount: \_\_\_\_\_ No Attendees: \_\_\_\_\_

**WAIVER AND RELEASE OF LIABILITY  
AND ASSUMPTION OF RISK AGREEMENT  
READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the South Bay Wailers, Inc. (AKA "Wailers Ski Club") programs, related events and activities, I (print name of participant), the Undersigned, acknowledge, appreciate, and agree that:

- 1.) The risk of injury from the many of the programs, related events, activities and use of machinery or equipment used in the activities is significant, including the potential for permanent paralysis and death, and while particular skills, rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
- 2.) I KNOWINGLY AND FREELY ASSUME ALL RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for my participation; and,
- 3.) I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- 4.) I willingly agree to adhere to all applicable laws, regulations, and rules, including, but not limited to, posted signs, instructions, boundaries, notices, and rights of way, and,
- 5.) I understand that alcohol may be served or made available at the programs, related events and activities to participants over the legal drinking age. I take full and unconditional responsibility for my own actions and alcohol consumption; and,
- 6.) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS South Bay Wailers, Inc., their officers, officials, directors, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the programs, related events and activities ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES, OTHER PARTICIPANTS OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY COERCION. I Hereby certify that I am eighteen (18) years of age or older and am competent to execute this agreement.

X \_\_\_\_\_  
*(Participant's Signature)* \_\_\_\_\_  
*(Date Signed)*

X \_\_\_\_\_  
*(Witness Signature)* \_\_\_\_\_  
*(Date Signed)*

**FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the RELEASEES from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. I also consent to allow medical treatment in the event of an emergency.

X \_\_\_\_\_  
*(Parent/Guardian Signature)* \_\_\_\_\_  
*(Date Signed)*

X \_\_\_\_\_  
*(Emergency Contact)* \_\_\_\_\_  
*(Emergency Phone)*