

Eco-Adventure Challenge 2004 Team Registration Form

Team Name: _____ Date: _____

Team Roster:

T-Shirt Size:

Team Member 1 (Captain): _____

medium large x-large

Team Member 2: _____

medium large x-large

Team Member 3: _____

medium large x-large

Team Member 4: _____

medium large x-large

Team Alternate 1: _____

Team Alternate 2: _____

*All teams must submit a full roster and the name of at least one alternate at the time of initial registration.

*All team members **must** be **18 years of age** or older to participate. Valid driver's license or picture id will be required at check-in on the day of the event.

Team HQ: (Team Captains Contact Information)

Address: _____

Phone Number (day): _____ (evening): _____

E-Mail: _____

Number of family/friends attending (for food purchasing wrist bands) _____

*Registration fees are \$35 per team member (Registration fees are not necessary for alternates).

*Registration fees include:

- Admission to the park (for team members, see Acceptance Packet for Park brochure on summer admission fees and regulations or click on **Patapsco Valley State Park** web site for more information)
- Canoeing equipment usage

- Water fill-ups
- EMS Staff
- Food after the event
- Team flags and passport books
- T-Shirts
- And a **Get-Down-and-Dirty, Rad-Rid'in, Foot-Stomp'in, Water-Splashing Time!!!**

*Each team registration form must be accompanied by a **CHECK** (or a check from each member) **totaling \$140** for the team. Check(s) should be made out to: **Team Extreme**.

***Registration forms and risk waivers can be:**

Faxed to: (802) 609-7756
Mailed to: Team Extreme HQ, 6129 Hunt Club Rd., Elkridge, MD 21075
E-mailed to: Team_Extreme2004@yahoo.com (Please note: Risk waivers **must** be signed by **all** team members and returned via regular mail)

***Refund Policy:** Refund requests must be made in writing and received by September 1st, 2004. No refund requests will be accepted after September 1st. Please include a self addressed stamped envelope with your signed refund request. In the event of a cancellation, all monies will be returned to participants.

Emergency Contact Information:

For Team / Team Member: _____
Name (of contact): _____ **Phone #:** _____
City: _____ **State:** _____

For Team Member: _____
Name: _____ **Phone #:** _____
City: _____ **State:** _____

For Team Member: _____
Name: _____ **Phone #:** _____
City: _____ **State:** _____

For Team Member: _____
Name: _____ **Phone #:** _____
City: _____ **State:** _____

RELEASE AND WAIVER OF LIABILITY

I have voluntarily applied to participate and compete in an athletic endurance competition by Team Extreme held in Patapsco Valley State Park, MD (also known as “the Event”). I understand the Event is an endurance race involving hiking, mountain biking and canoeing. I represent I am proficient in each of the foregoing activities and regularly participate therein, and I am therefore familiar with the varied risks attendant to each of the activities.

I understand the DANGERS associated with the above mentioned endurance race and acknowledge the event carries the potential for SERIOUS INJURY, ILLNESS, PROPERTY LOSS/DAMAGE AND DEATH. I freely and voluntarily accept these risks which are associated with the above mentioned Event.

I ACKNOWLEDGE that my participation in the event will be a TEST OF MY PHYSICAL ABILITIES. I represent that I am in SOUND MEDICAL CONDITION, capable of participating in the Event WITHOUT RISK TO MYSELF OR OTHERS and that I have NO PHYSICAL OR MEDICAL IMPEDIMENT which would endanger myself or others during this Event.

I understand Team Extreme will provide various services and equipment in connection with the Event. These services and equipment may include, but are not limited to: operation and management of the route, check points and aid stations, food and water, canoes, paddles and life vests, medical and first aid services. I acknowledge that neither Team Extreme nor anyone else, has made any warranties whatsoever in respect to the equipment or services furnished by them for the Event. I acknowledge that I will use the equipment or services entirely at my own risk.

I HEREBY AGREE THAT I OR MY REPRESENTATIVES, LEGAL OR OTHERWISE WILL NOT SUE, CLAIM AGAINST, ATTACH THE PROPERTY OF, OR PROSECUTE ANY OF THE FOLLOWING PERSONS, ENTITIES OR ANY OF THEIR ASSOCIATES, OR ANY OF THE PRESIDING ENTITIES FOR ANY INJURY TO ME OR MY PROPERTY, OR MY DEATH, IN ASSOCIATION WITH THE EVENT:

- All private landowners upon whose private property the course traverses
- All local and other governmental agencies whose property, personnel, or services are in any way involved or related to the Event or its activities
- Any advertiser of the Event, any spectator of the Event, any other participant in the Event, any provider of equipment or services for the Event, any provider of personnel, transportation, medical, first-aid, emergency or rescue services in connection with the Event
- Any contractor of or outfitter providing goods or services in connection with the Event, who may be contracted after printing date of this document and therefore not listed above.
- Any volunteer participating in the Event.

IN ADDITION, I HEREBY UNCONDITIONALLY RELEASE AND FOREVER DISCHARGE EACH OF THE FOREGOING PERSONS AND ENTITIES AND THEIR RESPECTIVE REPRESENTATIVES FROM ANY AND ALL ACTIONS, LIABILITIES, DAMAGES, LOSSES, COSTS, EXPENSES, CLAIMS OR DEMANDS THAT I OR MY REPRESENTATIVES, LEGAL OR OTHERWISE, NOW HAVE OR MAY HEREAFTER HAVE FOR ANY INJURY TO ME OR MY PROPERTY, OR MY DEATH, RESULTING DIRECTLY OR INDIRECTLY FROM MY PARTICIPATION IN THE EVENT OR ACTIVITIES ASSOCIATED WITH THE EVENT.

I HAVE CAREFULLY READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS. I AM AWARE THIS DOCUMENT IS A RELEASE OF ALL LIABILITY AND A CONTRACT ENFORCEABLE AGAINST ME IN A COURT OF LAW. I HAVE SIGNED THIS DOCUMENT OF MY OWN FREE WILL.

PARTICIPANT: _____

DATED: _____

Print: _____

WITNESS: _____

DATED: _____

Print: _____