

16th Annual
CARDBOARD BOAT RACE



JUST WHEN YOU THOUGHT IT WAS SAFE TO GO BACK IN THE WATER
OXFORD, MD JUNE 12TH, 2004

CARDBOARD BOAT RACE REGISTRATION & PLEDGE FORM

MAKE ALL CHECKS PAYABLE TO SPECIAL OLYMPICS MARYLAND. DONATIONS ARE TAX DEDUCTIBLE TO THE EXTENT OF THE LAW. PLEASE ENCLOSE ENTRY FEE WITH THIS FORM. INDIVIDUALS WISHING TO ENTER MORE THAN ONE CLASS, ADD \$10 FOR EACH ADDITIONAL RACE. THE FEE IS NON-REFUNDABLE. PLEASE PRINT. FILL OUT THIS FORM & RETURN WITH YOUR FEE TO: BBI / P.O. BOX 626 / OXFORD, MD 21654.

Online registration is available at www.somd.org. Click the Cardboard Boat Race logo and follow prompts. Registration cut off is June 3, 2004

TOTAL MONEY RAISED IN PLEDGES: \$ _____

Mr. / Mrs. / Ms.: _____

Age: _____ Phone: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Circle number of races entering: 1 2 3 4 5

Boat Captain: _____ Name of boat: _____

Race Category: _____

Notify in Emergency: _____ Phone: _____

Member MD Law Enforcement? Yes No Agency: _____

Donor's Name	Amount	Donor's Name	Amount
1 _____	\$ _____	8 _____	\$ _____
2 _____	\$ _____	9 _____	\$ _____
3 _____	\$ _____	10 _____	\$ _____
4 _____	\$ _____	11 _____	\$ _____
5 _____	\$ _____	12 _____	\$ _____
6 _____	\$ _____	13 _____	\$ _____
7 _____	\$ _____	14 _____	\$ _____

Waiver and Release: Participants under 18 must have a parent or guardian signature

In consideration of participating in the BOAT BUMS INTERNATIONAL CARDBOARD BOAT RACE, I represent that I understand the nature of the event and that I and/or my minor child are qualified, in good health, and in proper physical condition to participate in such an event. I acknowledge that if I/my minor child believe the event conditions to be unsafe, I will immediately discontinue participation in the event. I fully understand the event involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs and damages I incur of my participation in the event. I hereby release, discharge, and covenant not to sue Special Olympics Maryland, their respective administrators, directors, agencies, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "Releasee" herein) from all liability, claims, demands, losses, or damages on my account and/or that of my minor child caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage or cost which may incur as a result of such claim.

Signature: _____ Date: _____