

Duct Tape Regatta Team Information - Please Print Clearly

Please complete the team info along with a waiver release form with required signature for each team member. Up to 10 people per team.

TEAM NAME	
TEAM CAPTAIN CONTACT INFO	
Name	
Phone	
Email	
TEAM MEMBER NAMES	

Individual Waiver Form is available on website for additional team signatures.

I, the undersigned, acknowledge that my participation in the Art City Days Duct Tape Regatta may subject me to possible hazards and risks, including bodily injury. In consideration of my being permitted to participate in the Art City Days Duct Tape Regatta event, I by such participation agree to assume such hazards, risks, and conditions.

In consideration of my being permitted to participate, I do hereby waive, release and forever discharge Springville City and its officers, employees, agents, representatives, volunteers and all others acting on its behalf from any and all claims or causes of action known or unknown for any and all injury, illness, damage or loss, including, but not limited to, death, that may occur to me or my personal property as result of any aspect of my participation in the Art City Days Duct Tape Regatta.

I agree to defend and indemnify Springville City and its officers, employees, agents, representatives and all others acting on its behalf, including any that result from claims or lawsuits for personal injury, death, or personal property damage, relating to my participation in the Art City Days Duct Tape Regatta.

I further expressly agree that the forgoing Participant Release and Waiver of Liability Agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Utah. The undertakings and covenants of the foregoing provisions shall be binding upon me, my heirs, legal representatives, successors and assigns.

I, THE UNDERSIGNED, HAVE READ AND VOLUNTARILY SIGNED THIS PARTICIPANT RELEASE AND WAIVER OF LIABILITY AGREEMENT, and further agree that no oral representations, statements, promises, or inducements apart from the foregoing written agreement have been made. I ASSUME ALL THE RISK INHERENT IN PARTCIPATING IN THE DUCT TAPE REGATTA EVENT AND VOLUNTARILY SIGN MY NAME EVIDENCING MY ACCEPTANCE OF THE ABOVE PROVISIONS.

Adult Participant's Signature

Date

Adult Printed Name

PARENTAL CONSENT: I give my consent for my **child / children** to participate in the Art City Days Duct Tape Regatta knowing the inherent risks associated with the activity. I do hereby release Springville City, and its officers, employees, agents, representatives and all others acting on its behalf from any and all liability, including, but not limited to, any and all loss, damage, personal injury, or claims my child or I may have as a result of my child's participation in the Art City Days Duct Tape Regatta.

I further release any and all said officers and other participants for any claims whatsoever on account of first aid treatment or service rendered to my child during or related to his/her participation in the said Duct Tape Regatta.

Date