

Lavallette Municipal Alliance/Recreation
2016
SKIMBOARDING
COMPETITION

Participant Registration

Last Name _____ First Name _____

Address _____ City _____

State _____ Zip _____ Age _____

\$18 Pre-Registration
\$20 Registration Fee –Day of Event
(Make checks Payable to Lavallette Municipal Alliance)

Paid _____ Pay @ event _____

July 22, 2016
Contest Day Registration: 8:00AM Contest Begins at 8:45AM
President @ the oceanfront
15 Minute Heats Top 2 from each heat will move on.

Please read carefully before signing: In consideration of the acceptance of my entry in the 2016 Skimboarding competition, I, my heirs, executors, and administrators hereby discharge Ocean County, Lavallette Borough, and all sponsors and producers of this event, their agents, officers, employees, volunteers, event directors and event holders, and anyone associated in any way with the event, from all liabilities, actions, claims, demands, damages, costs and expenses I may now or in the future have against them arising out of my participation in the above mentioned 2016 skimboarding contest, Lavallette NJ, including, but not limited to, all injuries that may be suffered by me. I attest and verify that to the best of my knowledge, my physical condition and fitness are adequate for me to safely compete in the contest mentioned above and that no physicians or other individual has advised me against competing in any part of these events.

I certify that I have read this document and attest to its content.

Signature _____ Date _____

Parent/Guardian
Signature _____ Date _____