

5th Annual

\$2
ENTRY FEE



PARTICIPANT

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last name	First Name	State	Age
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	City	State	ZIP

EMERGENCY CONTACT

<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	Phone	Relationship to Student

MD STATE PTA PARTICIPANT WAIVER

In the consideration of the acceptance of my entry in RAM Relay Night on Friday, March 2, 2018, hosted by Parkside High School PTA in Salisbury, MD, I:

(PRINTED student name)

the undersigned participant, intending to be legally bound, do hereby for myself and heirs, executors, administrators and assigns, forever waive, release and discharge any and all rights, claims and actions for damages that I may have, or that may hereafter accrue to me against the Maryland PTA, including all units and councils, and all of their officers, directors, members and volunteers. I attest and verify that I am physically fit and able to participate in this event and acknowledge that I am aware of the inherent risks in participating in an athletic event of this type.

UNDER 18

18 & OLDER

Parent/Guardian Signature

Student Signature

Parent/Guardian Printed Name

Date

Student Printed Name