

Maumelle Youth Council

2019 FUN RUN

Saturday April 6th at 9am

NAME (First / Middle / Last): _____

(Circle) Male / Female BIRTHDATE: _____ AGE: _____

PARENT/ GUARDIAN NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE (Home) _____ Parents Work Phone _____

EMAIL ADDRESS _____

Any Existing Medical Conditions: _____

Emergency Contact:

1. _____ Phone: _____

2. _____ Phone: _____

WAIVER OF LIABILITY: By signing below, participant/parent/guardian understands and accepts that he/she or their child who is named above is agreeing to participate in the 2019 FUN RUN at his/her risk. Participant/Parent/Guardian hereby expressly waives any claim of liability against the City of Maumelle or the Maumelle Youth Council for any negligence, personal injury, premises liability, or other damages which occur to participant during the above described tennis lessons. This waiver is a complete release of any responsibility for injuries or damages sustained whether or not the participant was engaged in while participating in the 2019 FUN RUN at the time of the injury.

Signature of Participant/parent or guardian if under 18yrs

Date

FOR OFFICE USE ONLY:

TOTAL PAID \$ _____ EARLY REGISTRATION? Yes ___ No ___ CASH ___ CHECK# _____ DATE _____ BY _____