

Bay Area Orienteering Club Event Entry Form

Name(s) _____ O' Club _____

Please Print (Enter names of all members of group. Use a separate form for each group running separately.)

Non-Member: Email address(es) _____

How did you hear about the event? _____

REQUIRED SAFETY INFO: Car Make/Color/License _____ Phone # _____

CHECK IN AT THE FINISH BY 2 PM!!! (Failure to do so may result in a search and rescue effort.)

BEGINNER'S COURSE: White, Yellow (circle one)

Per-Person Fee ___ Adults @ \$8 / ___ Juniors @ \$3 = \$ _____

INTERMEDIATE/ADVANCED COURSE: Orange, Relay (circle one)

Per-Person Fee Member ___ Adults @ \$15 / ___ Juniors @ \$5 = \$ _____

Non-Member ___ Adults @ \$20 / ___ Juniors @ \$5 = \$ _____

EQUIPMENT RENTALS: E-stick(*) _____ @ \$5 = \$ _____

Compass _____ @ \$1 = \$ _____

BAOC MEMBERSHIP: Fill out membership form (\$15, \$20, \$30, ...) = \$ _____

TOTAL = \$ _____

(*) **E-stick Rental Agreement:** I agree to return the rental "E-stick" at the end of the event. In the event of loss or damage to the rental, I agree to reimburse BAOB **forty dollars (\$40)** within ten (10) days of the event.

Note: All entrants must sign the *Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement* on the back of this Entry Form

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration of being permitted to participate in any way in the Orienteering USA member club events, I and/or my minor child, our personal representatives, assigns, heirs, and next of kin (hereafter referred to as "I", "me", and "my"):

1. Acknowledge that there are risks associated with orienteering activities, that I am in good health, and if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the activity. The risks may cause minor injuries, serious injuries, or in extreme circumstances even death;
2. Understand that the risks associated with orienteering may be caused by me through my own actions, or inaction, or the actions or inaction of others participating in the activity and that there may be other risks either not known to me or not readily foreseeable. I fully accept all such risks and responsibility for losses, costs and damages, I incur as a result of my participation in the Activity;
3. Hereby accept and assume all such risks, and assume all responsibility for the losses, costs, and/or damages following such injury, or death, even if caused in whole or in part, by the negligence of any and all of those involved with the running of the event and hold them harmless;
4. Have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely without the inducement or assurance of any nature, and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law, and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.
5. **EBRPD Supplemental Waiver: I understand and agree that this athletic event will test physical and mental limits and there is the possibility that I may suffer property loss, serious injury or death. This could be caused by the terrain, facilities, trail conditions and/or traffic on the roads and trails. This could also be caused by the actions of other people including but not limited to participants, volunteers, spectators, event producers, course monitors, members of the Bay Area Orienteering Club and East Bay Regional Park District employees, directors and/or volunteers. I HEARBY FREELY AND VOLUNTARILY ASSUME ALL RISKS OF PARTICIPATING IN THIS EVENT.**

Signatures(s) of All Entrant(s) (parent if minor)

Print Name _____

Signature _____ **Date** _____

Print Name _____

Signature _____ **Date** _____

Print Name _____

Signature _____ **Date** _____

Print Name _____

Signature _____ **Date** _____

Print Name _____

Signature _____ **Date** _____