



“Freezin’ for a Reason”
Fundraiser for Pool Cover Reels
2017 FUN RUN / WALK / PLUNGE
 Saturday, December 2nd, 2017 * 10:30 AM

AQUATIC CENTER IN DESTIN
 4345 Commons Drive West, Destin, FL 32541

REGISTRATION

Entry Fee
\$10 Ages 4-12 * \$20 Ages 13-up

REGISTRANT NAME (LAST, FIRST) _____

BIRTHDATE _____ **AGE:** _____ **MALE OR FEMALE**

ADDRESS: _____

HOME PHONE: _____ **WORK PHONE** _____

CELL PHONE: _____ **EMAIL:** _____

EMERGENCY CONTACT (NAME & PHONE) _____

ANY HEALTH CONCERNS OR SPECIAL NEEDS THE STAFF SHOULD BE AWARE OF:

I acknowledge that by signing this document, I am releasing Emerald Coast Fitness Foundation, Inc., Mattie Kelly Arts Foundation, Inc., its officers, agents and employees from liability. This is a contract with legal consequences. I have been advised to read it carefully before signing. The undersigned hereby covenants and agrees to investigate all claims of every nature at its own expense and to indemnify, protect, defend, hold and save harmless the Emerald Coast Fitness Foundation, Inc., Mattie Kelly Arts Foundation, Inc., its officers, agents and employees, from any and all claims, actions, lawsuits and demands of any kind or nature arising out of this agreement. For and in consideration of the opportunity to participate in swimming and related activities at the Destin Aquatic Center at 4345 Commons Drive West, Destin, Florida, the undersigned participant, my heirs, successor and assigns, forever hold harmless the Emerald Coast Fitness Foundation, Inc., Mattie Kelly Arts Foundation, Inc., its officers, agents and employees, from any and all liability whatsoever for any personal property damage or for any personal injury that may result from said participation. I agree, for myself, my successors and assignee, that the above representations are contractually binding and are not mere recitals, and that should I or my successors assert any claim in contravention of this agreement, the asserting party shall be liable to the expenses (including legal fees) incurred by the other party or parties. This agreement may not be modified orally, and waiver of any provision shall not be constructed as a modification of any provision herein or as consent to any subsequent waiver or modification. I am at least 18 years of age and suffer from no physical, mental, legal or other disabilities that prevent me from fully understanding the terms of signing this agreement.

REGISTRANT SIGNATURE (parent, if under 18) _____ **DATE** _____

Office use: Registration fee payment: Amt: _____ **Date:** _____ **CA CK CC Initials** _____