

Registration Information and Photo Release

I, the undersigned submit this entry form for the Murray in Motion Community Health & Fun Day event. I, the undersigned release to the event any photographs and/or recordings that they may make of us and acknowledge that such media shall be the property of the event and organizers.

SIGNATURE of Responsible	Party		DATE		
Address:			Phone :		
It is my desire to par reasonable has been done to a associated with all outdoor rec am fully aware that it is possibl As for consideration and/or bodily injury to my per myself or other persons in haza to use all appropriate equipme I, the undersigned, as	ticipate in the ssure that CS a reational activite for me to receive participate it son or property ardous situation in the outdook claims or dame of the sume responsibility of the sume responsibility of the sume responsibility of the sume responsibility of the sum of the outdook and hold harm on in the outdook claims or dame	outdoor recreational ctivities have been mades, which would include in these activities, I, that are associates was. I the undersigned rests and helmets) as ility for replacement oor activities have in NFERENCE CENTIFIES said organization activities. I further ages, damages in land	l activities provided by nade as safe as possible clude, but are not limite ody which could be per the undersigned, herel with or arise out of this d, also promise to abide specified by CS. or repair of equipment wherent risks. I, the under the part of a parent orgons from any and all cor agree to release, acquired, or remedies in equi-	however, I, the undersigned to, waterfront activities manently disabling or could by knowingly and intelligativity. I, the undersigned by the rules, which are determined to damages occurring andersigned, knowingly acquaitations from any and laims, damages, injuries, t, and covenant not to such the damages of the covenant of the such that the covenant of the covena	rence Center (CS). Everything the and zipline. I the undersigned ld even cause me to die. The ently assume the risks of harm d, agree to not knowingly place esigned for my safety and agree g during my rental. The cept and assume this risk, and all liability and responsibility and expenses arising out of or estaid organizations for any and the central content of the content of th
I, the undersigned, am 18 or older and have read and understood this agreement. SIGNATURE of Adult DATE				t. Recre Ziplin	ation ne Time
PA I, the parent/guardian, hereby are listed below. I have read the SIGNATURE of Parent / Guardian.	AGRE give my consen ne above release	EMENT FOR PAR t for all participants and assumption of r	TICIPANTS UNDER under 18 years of age for isk agreement to be bo	or whom I am responsible und by it.	
Names of Children P Name Name	Age	G R Z time	Name	ecreation or Zipline Age Age	
Name				Age	