



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Oconomowoc Five-O Fast Feet Log Rolling Tournament
Sunday March 4, 2012

11:00 am Warm-ups • Competition begins at 11:30 am
Pizza and awards following the tournament.

Name: _____ Birthdate: _____ Yrs Rolling: _____

Name: _____ Birthdate: _____ Yrs Rolling: _____

Name: _____ Birthdate: _____ Yrs Rolling: _____

Address: _____

Phone: _____ Email: _____

T-shirt Size (# needed if more than 1 contestant listed):

Kids 10-12____ Kids 14-16____ Adult: S____ M____ L____ XL____

Rolling & Speed Birling Division [Age on Jan. 1, 2012]

_____ Co-Ed 7 & Under

_____ U10 Boys

_____ U10 Girls

_____ U13 Boys

_____ U13 Girls

_____ U17 Boys

_____ U17 Girls

_____ Adult Novice

-----detach here-----

Oconomowoc Five-O Fast Feet Log Rolling Tournament

Sunday 3/4/12 • 11:00 am warm-up/11:30 Competition

Entry fee: \$30 per roller (\$75 max per family) payable to: YMCA at Pabst Farms.

- **T-shirt for entries postmarked by Monday, February 20**
- **Late fee of \$5 for entries postmarked after Monday, February 20**

Mail entry to:

YMCA at Pabst Farms, Attn: Peg Loomis, 1750 E. Valley Rd. Oconomowoc, WI 53066

Awards and pizza immediately following the tournament.

Directions from the North/West:

(Oconomowoc is located mid-way between Madison and Milwaukee on I-94.)
Take I-94, 41 miles past Madison (toward Milwaukee) to exit 282 (hwy 67). Turn North (Left) at the end of the ramp and go 0.6 miles to Valley Rd. (hwy B) and turn right. The Y is approx. 1 mile on the left. Enter through the Main Entrance (South side) of the building.

YMCA at Pabst Farms 262-567-7251
Tournament Director: Kyle Mengwasser 262-501-6221

**YMCA AT PABST FARMS
RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to **release and discharge from liability** arising from negligence *YMCA at Pabst Farms & Watertown Area YMCA Association* and its directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. **I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees.** My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. **I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct.** Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. **I have read and understood this document and I agree to be bound by its terms.**

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Phone () _____ Date _____ Date of Birth _____

**PARENT OR GUARDIAN ADDITIONAL AGREEMENT
(Must be completed for participants under the age of 18)**

In consideration of _____, _____,

_____, _____, (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian _____ Print Name _____ Date _____
(If notarization is necessary, please sign & stamp this side of form.)

Parent or Guardian phone number _____

MEMBER COMMUNITY PARTICIPANT