

2017 Feather River Recreation & Park District Registration Form



**Registering is
Easy!**

Online
www.frrpd.com



Mail-In
1875 Feather River Blvd.
Oroville, CA 95966



Walk-In • Phone
1875 Feather River Blvd.
Oroville, CA 95966
530-533-2011



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|--|---|-------------------------------|--------------------------|-----------------|-------------------------------|--|
| Adult Last Name | Adult First Name | | | | (Relationship to Participant) | |
| Address | City | State | Zip | | | |
| Home Phone | Cell Phone | Work Phone | | Emergency Phone | | |
| E-mail | <input type="checkbox"/> Add me to the FRRPD Monthly Newsletter | | | | | |
| How did you hear about us? (circle one) | Friend/Referral | Website/Social Media/Facebook | Flyer | Newspaper | Event/Promotion | |
| Participant Name | Sex M/F | DOB | Class/Activity Title | | | |
| | | | Turkey Trot Fun Run/Walk | | | |
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Agreement Waiver and Release

I have carefully read the description of the program(s) for which I/we are registering and in consideration for being permitted by the Feather River Recreation and Park District to participate in the above activity. I hereby waive, release and discharge any and all claims for damages for personal injury, death or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the Feather River Recreation and Park District (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks. It is further agreed that this waiver, release and assumption risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity. Parental Consent: (to be completed and signed by parent/guardian if participant is under 18 years of age). I hereby consent that my son/daughter may participate in the above activity. I hereby execute the above agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned harmless from any loss, liability, damage, cost or expense which they may incur as a result of death or injury or property damage that said minor may sustain while participating in said activity. In case of emergency, participant(s) may be treated by a qualified physician. All payments must be made by the 10th of each month. If payment is not received by the 10th, I will be charged a \$10 late fee. FRRPD reserves the right to photograph facilities, activities and program participants for potential future use in advertising brochures and FRRPD's website or social media. All photos will remain the property of FRRPD. *I have carefully read this Agreement, Waiver and Release and fully understand its contents. I am aware that this is a release of liability and a contract between me and the Feather River Recreation and Park District and I sign it of my own free will. *Please read GYMNASTICS WAIVER on back side before signing if you are participating in Gymnastics.

Signature _____ Name _____ Date _____

Join FRRPD for this Fun Run/Walk Cross Country Turkey Trot 2017

Saturday, November 18th @ Riverbend Park

Check in/Race Time: see below

Race Time: 10:00 AM

Grades: K -8th & adults of all ages

This is a rain or shine event.

Rules: Co-ed race, grade and distance details below. First race will start at 9:30 AM, all other races will start at the conclusion of the previous race. All runners need to be checked-in half before race time (see below). All racers will be guided through a walk-through of course prior to the race starting. Runners may choose to participate in distance greater than what is listed for their grade, but cannot choose to run a distance less than what is listed.

| Grade/Distance | Check In Time / Race Time |
|-----------------------------------|----------------------------------|
| Pre-K/K: 1/4 mile | 9:00 AM / 9:30 AM |
| 1st/2nd: 1/2 mile | 9:15 AM / 9:45 AM |
| 3rd/4th: 3/4 mile | 9:45 AM / 10:15 AM |
| 5th/6th: 1 mile | 10:00 AM / 10:30 AM |
| 7th/8th: 2 miles | 10:30 AM / 11:00 AM |
| 9 th – adults: 2 miles | 11:00 AM / 11:30 AM |

To be filled out and turned in at time of registration:

Participants Name:

Participants Grade (please circle):

| | |
|-----------------------------------|---------------------|
| Pre-K/K: 1/4 mile | 9:00 AM / 9:30 AM |
| 1st/2nd: 1/2 mile | 9:15 AM / 9:45 AM |
| 3rd/4th: 3/4 mile | 9:45 AM / 10:15 AM |
| 5th/6th: 1 mile | 10:00 AM / 10:30 AM |
| 7th/8th: 2 miles | 10:30 AM / 11:00 AM |
| 9 th – adults: 2 miles | 11:00 AM / 11:30 AM |

If participant is under 18 yrs., please fill out emergency contact information. If over 18 years old, please put your name and best number to reach you.

Emergency Contact:

Name:

Phone Number: