

2010 SNI Cattaraugus Recreation Department

"SCHOOLS OUT!" 5K Race

Monday, December 27, 2010

Participant Waiver/Release Form

(please complete and return to any Recreation Staff)

Name: _____ M / F Age: _____ DOB: _____

(circle one)

Address: _____

Phone #: _____ Email: _____

Emergency Contact: _____ Phone #: _____

Allergies/Medical Conditions: _____

Waiver

Declaration: In consideration of you accepting my entry and permitting me to attend or permitting me to participate therein, I intend to be legally bound hereby for myself, my heirs, executors or administrators, waive and release all rights and claims for damages I may now or in the future have against the Seneca Nation of Indians, their representative, agents, members or assigns for any and all losses and injuries suffered from competing in, or attending said event.

I give my permission to publish in a newspaper or any mass media, any photographs, slides or videotape in which I appear while participating in any SNI activity.

Participant Signature: _____ Date: _____

(parent/guardian signature if participant is under the age of 18)

Staff use only:

Staff Initial: _____

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