

Nantahala Racing Club Race Entry Form

Race Name: 2007 Glacier Breaker Slalom & Wildwater Races

Date: February 24-25, 2007

Entry fees: Slalom - \$25 per person for the first class, plus \$5 for each additional class.
Wildwater - \$15 per person for one race or \$25 for both races.
USACK membership required. One-day USACK memberships available at registration.

See Race Schedule for Additional Information and Times

******* COMPETITORS INFORMATION *******

Name _____ Phone # (____) _____

Address _____

City _____ State _____ Zip _____

ACA Member # _____ USACK Member # _____

Birthday _____ **Total Amount Enclosed \$ _____

SLALOM (check class & age level):

- K-1 K-1W C-1 C-2 C-2 (Partner _____)
 Cadet (ages 14 & under) Junior (ages 15-18)

WILDWATER (check class & age level):

- K-1 K-1W C-1
 Cadet (ages 14 & under) Junior (ages 15-18)

NOTE: It takes 3 boats to make a class for both Slalom and Wildwater races.

Make check payable to: [Nantahala Racing Club](http://www.nantahalaracingclub.com)

Mail completed entry form, USACK waiver, and entry fee to:

Nantahala Racing Club
2007 Glacier Breaker and Wildwater Races
P. O. Box 134
Almond, NC 28702

For additional information or if you would like to volunteer to help with the races contact the NRC office at 828.488.2176 ext. 108, or e-mail: rhino@main.nc.us or visit us at www.nrcrhinos.com.

USACK Waiver, Indemnification, and Release of Liability

In consideration of being allowed to participate in any way in the USACK, Inc. athletics/sports program, and related events and activities, the undersigned, for him/herself, his/her personal representatives, heirs, next of kin:

1. Agree that prior to participating, he/she each will inspect the facilities and equipment to be used, and if he/she believes anything is unsafe, he/she will immediately advise his/her coach or supervisor of such condition (s) and refuse to participate.
2. Acknowledges and fully understands that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from his/her own actions, inaction's or negligence, but the actions, inaction's or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assumes all foregoing risks and accept personal responsibility for the damages following injury, permanent disability, or death.
4. Releases, waives, discharges and covenants not to sue the USACK, its affiliated clubs, their respective administrator, directors, agents, coaches, and other employees of the organization, other participants sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, all of which are hereafter referred to as releasees, from any and all claims, liability demands, losses, or on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
5. Agrees to indemnify and save and hold harmless the releasees from any loss, liability, damage, or cost they incur due to the presence of the undersigned in any way competing, officiating, observing, or working for, or any purpose participating in the event.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER, INDEMNIFICATION AND RELEASE, UNDERSTANDS THAT HE/SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGNS IT VOLUNTARILY.

Signature of Participant _____ Date _____

Printed Name of Participant _____ Date of Birth _____

Waiver and Release of Liability for Minors

In consideration of being allowed to participate in any way in the USACK, athletics/sports program, and related events and activities, the undersigned, for him/herself, his/her personal representatives, heirs, next of kin:

1. Agree that the parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating, he/she should inspect the facilities and equipment to be used, and if the participant believes anything unsafe, he or she will immediately advise their coach or supervisor of such condition (s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction's or negligence, but the actions, inaction's or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assumes all foregoing risks and accept personal responsibility for the damages following injury, permanent disability, or death.
4. Releases, waives, discharges and covenants not to sue USACK, its affiliated clubs, their respective administrator, directors, agents, coaches, and other employees of the organization, other participants sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, all of which are hereafter referred to as releases, from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims to property, caused or alleged to be caused on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
5. Agrees to indemnify and save and hold harmless the releasees from any loss, liability, damage, or cost they incur due to the presence of the undersigned in any way competing, officiating, observing, or working for, or any purpose participating in the event.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT VOLUNTARILY.

Signature of Parent or Guardian _____ Date _____

Printed Name of Parent or Guardian _____ Relationship _____

Printed Name of Participant _____ Date of Birth _____

Address of Participant _____

City _____ State _____ Zip _____

Club/Organization _____