

2005 PAN AMERICAN SLALOM CHAMPIONSHIPS

OFFICIAL REGISTRATION FORM

Print out form, fill out and fax or mail to the address shown below

DEADLINE DATE FOR ENTRIES: MUST BE RECEIVED BY AUGUST 20, 2005 BY THE ORGANIZERS, ADDRESS & CONTACT INFORMATION SHOWN BELOW

A signed USACK Waiver must be attached for each competitor (you may bring the waivers with you to the registration office in Kernville instead of faxing, if you prefer)

Federation Name (Country) _____

Contact Name _____

Address _____

Address _____

Phone: International Code _____ Phone _____

Email _____

ATHLETE INFORMATION

Your team is entitled to a maximum of six boats in each category. Categories are K1-Men, K1-Women, C1 and C2. All boats must meet ICF Slalom regulations.

Name _____ Category _____ K1

Address _____ _____ K1-W

Address _____ _____ C-1

Phone _____ email _____ _____ C-2

Name _____ Category _____ K1

Address _____ _____ K1-W

Address _____ _____ C-1

Phone _____ email _____ _____ C-2

Name _____ Category _____ K1

Address _____ _____ K1-W

Address _____ _____ C-1

Phone _____ email _____ _____ C-2

Please send this information to:

Kern Valley River Council
23112 Baltar Street
West Hills CA 91304-3503 USA
Fax: (818) 713-1685

2005 PAN AMERICAN SLALOM CHAMPIONSHIPS

OFFICIAL REGISTRATION FORM

ATHLETE INFORMATION

Name _____	Category _____	K1
Address _____		_____ K1-W
Address _____		_____ C-1
Phone _____ email _____		_____ C-2
Name _____	Category _____	K1
Address _____		_____ K1-W
Address _____		_____ C-1
Phone _____ email _____		_____ C-2
Name _____	Category _____	K1
Address _____		_____ K1-W
Address _____		_____ C-1
Phone _____ email _____		_____ C-2
Name _____	Category _____	K1
Address _____		_____ K1-W
Address _____		_____ C-1
Phone _____ email _____		_____ C-2
Name _____	Category _____	K1
Address _____		_____ K1-W
Address _____		_____ C-1
Phone _____ email _____		_____ C-2

**USA CANOE/KAYAK
WAIVER AND RELEASE OF LIABILITY
READ BEFORE SIGNING**

IN CONSIDERATION of being permitted to participate in any way in the National Paddling Committee, Inc. dba USA Canoe/Kayak sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, or next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Paddlesports and related Activities and that I am qualified, in good health, in proper physical condition to participate in such Activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe a condition to be unsafe, I will immediately notify the nearest official and discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSON, PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE National Paddling Committee, Inc. dba USA Canoe/Kayak, its affiliated clubs, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: _____ SIGNATURE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

DATE OF BIRTH: _____ USACK #: _____ CLUB/ORGANIZATION: _____

PHONE: (_____) _____ Email _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF PADDLESPO RTS AND RELATED ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, AND DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS OF LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: (_____) _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18):

Signature _____ Date _____