



**The Rotary Club of Moorpark Presents:
"The Moorpark Mammoth Run"**

**PLEASE
SIGN
WAIVER ON
REVERSE
SIDE**

1 Mile Family Fun Walk Registration Form

Family Name _____

Number Walkers _____

One Family is \$35.

Each family receives 1 free Adult T-Shirt Indicate size here: _____

Additional T-shirts available if ordered in time. Each T-shirt is \$18.

Indicate # & Adult Sizes: ____S ____M ____L ____XL ____XXL (\$2.50 extra)

Address: _____

Email Address: _____

In case of Emergency, please contact: _____

Phone: _____

Payment Method:

- ☐ Paid through Paypal
- ☐ Check attached
- ☐ Charge my credit card

Name on card: _____

Payment Address if different from above: _____ Zip: _____

Card # (if CC processor not present): _____ Exp Date: _____ CVV: _____

Charge the following, or include a check for the following:

Families _____ \$35 each

Additional T-shirts _____ \$18 each

Total to be charged or paid by check: \$_____

Email to moorparkrotary@yahoo.com

Mail to: RC Moorpark PO Box 172, Moorpark, CA 93020-0172

Print last name here _____

Waiver of Liability for The Moorpark Mammoth Run, Oct. 8, 2023

Sponsored by the Rotary Club of Moorpark.

Signature Required to Complete Registration and Participate in Event

INFORMED CONSENT AND RELEASE: I, the undersigned, voluntarily participate in the referenced activity. I agree and acknowledge that some activities may be of a hazardous nature and/or include physical and/or strenuous exercise or activity and understanding this I state that I have no knowledge of any condition that would prohibit me from safely participating. Please note: The Rotary Club of Moorpark does not provide any insurance coverage of any kind, for your participation. The Rotary Club of Moorpark strongly recommends that appropriate insurance be obtained by each participant. I, the undersigned, and in the event the undersigned is under 18 years of age, the undersigned's parents or guardian, in consideration of the request and permission to participate in the referenced activity, hereby assume full responsibility for all risk of injury or loss which may result from my participation in this activity and hereby AGREE TO DEFEND, INDEMNIFY, HOLD HARMLESS, RELEASE AND FOREVER DISCHARGE the Rotary Club of Moorpark from any and all acts of negligence and all claims and demands whatsoever, which the undersigned, any third person, or any persons acting under their behalf, have or may have against the Rotary Club of Moorpark, by reason of any accident, illness, injury to or death of any person or persons, or damage to or loss or destruction of any property arising or resulting directly or indirectly from participation in the referenced activity and occurring during said participation, or any time subsequent thereto. The terms of this release will serve as a release and assumption of risk for my heirs, executors and administrators and for all of my family members.

PERMISSION TO USE PHOTOGRAPHY: I grant the Rotary Club of Moorpark, at their discretion and free of charge, permission to use still photography of myself or my child(ren) participating in the Moorpark Mammoth Run for the purpose of publicizing said event.

PERMISSION FOR MEDICAL TREATMENT & TRANSPORT: I hereby grant the Rotary Club of Moorpark and agents thereof, permission to summon 911 in the event that myself or my child(ren) require advanced first aid or medical treatment. I further grant permission to transport myself or my child(ren) to a center of advanced care. I grant permission to any and all physicians, surgeons, medical personnel, and emergency medical technicians or paramedics to treat myself or my child(ren) if such treatment is reasonably required.

REFUNDS: I realize that no refunds can be issued for this activity.

Participant Name: _____

Participant Signature (or parent/guardian if under 18): _____

Print Name: _____

Date: _____