

Event Registration Form

PADDLIN' FOR THE BAYS

~~~ Poker Paddle and Cookout ~~~

**August 16, 2008 from 10 a.m. to 2 p.m.**  
at the Bayfront at Rehoboth Community (Camp Arrowhead Road)

PLEASE PRINT

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_

Tandem Kayak Partner Name: \_\_\_\_\_ Age: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Indicate Payment Amount:**

Single Entry (\$20.00)

Tandem Entry (\$30.00)

Yes, I'd like to rent a kayak for the event  
(Please note that this is not a kayak reservation as kayaks will be rented  
on first come, first serve basis on the day of the event)

No, I'll be bringing my own kayak

**REGISTRATION INSTRUCTIONS:**

Complete this form and mail it to the address shown below along with your check or money order payment. Please make check payable to "Paddlin' for the Bays".

**Mr. Eric Buehl**  
**Delaware Center for the Inland Bays**  
**39375 Inlet Road, Rehoboth Beach, DE 19971**

\*\* For online credit card payment, please go to [www.bayfrontatreboth.com/news-kayak.html](http://www.bayfrontatreboth.com/news-kayak.html).  
Choose "Pay by credit card" option and use PayPal to make a payment. After you made  
a payment, please fax the completed registration form to 302.226.8109

..... RAIN DATE IS SUNDAY, AUGUST 17, 2008 .....

*Your event registration is a tax-deductible charitable contribution as the Delaware Center for the Inland Bays, Inc. is a IRS recognized 501(c)(3) organization. Our tax ID number is 51-0365565. Our phone number is 302.226.8105.*

# ***“Paddlin for the Bays”***

## **Release of Liability**

In consideration of being allowed to participate in any way in the “Paddlin for the Bays” program, its related events, and activities, I, the undersigned, acknowledge, and agree that:

- I. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce the risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the sponsors/releasees (as listed below) immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE SPONSORS, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsor, advertisers, and if applicable, owners and lessors of premises used for the activity (“Releasees”) WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss of damage to person or property associate with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_  
**Participants Signature**

**For Parents/Guardians of Participants of Minority Age**  
**(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant; do consent and agree to his/her release as provided above of all the Releases, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to Indemnify and hold harmless the Releasees from any and all liabilities incident to minor child’s involvement or participation in these programs as provided above., EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

\_\_\_\_\_ (print name) \_\_\_\_\_ Date signed  
**Parent/Guardian’s signature**

**Sponsors/Releasees:**

**Rosemark Design Build, LLC • Bay Rose Homes, LLC**  
**Bay Rose Homes II, LLC • Bay Rose Homes III, LLC**  
**Quest Kayak • Center for the Inland Bays • Surfriders Association**  
**The Michael T. Rose Family of Companies**