Mother-Son Showdown

Sunday, May 19th at 10am

STANDARD DARTS SUPPLIED - BRING YOUR OWN NERF GUN

**FINAL REGISTRATION DUE BY MAY, 11TH 2024**

SPECTATORS ARE WELCOME BUT MUST REMAIN OUTSIDE THE PAVILLION & EVENT AREA. POP-UP TENTS & LAWN CHAIRS ARE WELCOME.

LUNCH IS PROVIDED TO REGISTRANTS **ONLY**

**REGISTER ONLINE OR**

**DETATCH THIS FORM BELOW AND DROP OFF OR MAIL TO:**

**SJ RESCUE SQUAD, INC. PO BOX 126, 38 MAIN STREET ADAMS NY 13605**

**PLEASE MAKE CHECKS PAYABLE TO SOUTH JEFFERSON RESCUE SQUAD INC.**

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|  | Quantity | Amount | Sub Total  |
| Tickets: 1 Adult & 1 Child |  | $65($75 after 4/22/24) |  |
| Additional Child |  | $25 EACH($30 after 4/22/24) |  |
| Additional Adult |  | $30 EACH ($35 after 4/22/24) |  |
| Dart CarriersTactical vest is size: 15” x 14” x 3’ (approx..) | \_\_\_\_: 2 Wrist Straps ($15)\_\_\_\_\_\_: Tactical Vest ($25) |  | **NOT AVAILABLE PAST** **4/22/24** |
| T-ShirtsAdult: S M L XL XXLChild: YS YM YL AS AM AL | Adult: \_\_\_\_\_\_\_\_\_\_\_Child:\_\_\_\_\_\_\_\_\_\_\_\_ | $25 EACH | **NOT AVAILABLE PAST****4/22/24** |
|  |  |  |  |

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total: \_\_\_\_\_\_\_\_

Mothers Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Additional Guest:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Son(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I know that participating in this event is a potentially hazardous activity for myself and my child(ren) and that we should not enter unless we are medically able. I agree to abide by any decisions of an official relative to my ability to safely complete the course. I assume all risks associated with participating in this event including but not limited to falls, contact with other participants, and effects of the weather, including heat and/or humidity, lightning, and extreme cold, traffic and the conditions of the road such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself, and anyone entitled to act on my behalf, waive and release the South Jefferson Rescue Squad, Inc. and event volunteers, their representatives and successors from all claims of liabilities of any kind arising out of my participation in this event or carelessness on the part of the persons named on this wavier. Furthermore, I grant permission to all foregoing to use my name and images of myself in any photographs, motion picture, results, publications or any other print, video graphic, or electronic record of this event for legitimate purposes.

Parent(s) Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_