



## Partners' Amazing Race Registration Form

Date: \_\_\_\_\_

### Participant #1

First & Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ T-Shirt Size: Adult S M L XL or Child S M L

Primary phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Day of Event Emergency Contact: \_\_\_\_\_  
Name Phone

Parent/Guardian Contact if under the age of 18: \_\_\_\_\_  
Name

Phone Alternate Phone

Any special needs required for participation? \_\_\_\_\_

\_\_\_\_\_

### Participant #2

First & Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ T-Shirt Size: Adult S M L XL or Child S M L

Primary phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Day of Event Emergency Contact: \_\_\_\_\_  
Name Phone

**Parent/Guardian Contact if under the age of 18:** \_\_\_\_\_  
Name

\_\_\_\_\_  
Phone Alternate Phone

**Any special needs required for participation?** \_\_\_\_\_

\_\_\_\_\_

**Team Information:**

**Team Name:** \_\_\_\_\_

**Team Email:** \_\_\_\_\_  
(all race correspondence will go to this address)

**Waiver/Release must be signed by each team member.  
Parent/Guardian signature is required for youth under the age of 18.**

My signature below indicates my agreement with the following statement:

I acknowledge that Partners in Routt County's Amazing Race can test a person physically and mentally and carries with it the potential for property loss, injury and even death. The risks include, but are not limited to, those caused by terrain, facilities, temperature and weather, physical condition of participants, dehydration, volunteers, spectators, event officials and event monitors, and producers of the event. I certify that I am physically fit for the event and have not been advised otherwise by a medical professional. I hereby consent to receive medical treatment, such may be deemed advisable in the event of injury, accident, and/or illness during the event. I understand that during the event I may be photographed and agree to allow such photos, videos or film likeness to be used for any legitimate purpose by event holders, producers, sponsors, and organizers. This Accident Waiver and Release of Liability is constructed broadly to provide release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this release and I understand its content.

\_\_\_\_\_  
Participant #1 Signature Date

\_\_\_\_\_  
Participant #2 Signature Date