

Richmond Area Good Old Days Festival

Waterball Tournament Saturday Sept. 10th, 2011

Official Entry Form

(Participant must be 18 years or older)

Team Name: _____

1) Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Participant Signature: _____ Date: _____

2) Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Participant Signature: _____ Date: _____

3) Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Participant Signature: _____ Date: _____

4) Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Participant Signature: _____ Date: _____

5) Last Name: _____ First Name: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Participant Signature: _____ Date: _____

Waiver: For and in consideration of my participation in the Richmond Area Good Old Days Festival Waterball Tournament, for myself, my executors, administrators and assignees, do hereby release and discharge the City of Richmond, Richmond Area Good Old Days Festival, Richmond Volunteer Fire Department, and any and all sponsors jointly and severally and hold them nameless from all actions, claims, demands, liabilities, loss, damage, or expense of whatever kind incurred, by reason of participation in or my preparation for the aforesaid race. I attest and verify that I have full knowledge of the risks involved in this event and that I am physically fit and sufficiently trained to participate in this event.



Mail Entry Form To:

Waterball 69360 N. Forest Ave. Richmond, MI 48062

Print Clearly, One Entry Per Team

Fire Department Members Only

