

For Office Use Only: Date Received: _____ Amount Enclosed: _____ Bib Number: _____
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# 2010 Lumberjack Jaunt Entry Form

## Sunday, January 31, 2010

**Please Print**

Name: \_\_\_\_\_

Birthday: \_\_\_\_\_ Age on 1/31/10: \_\_\_\_\_

Phone:( \_\_\_\_\_ ) \_\_\_\_\_ Sex: M / F

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

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

E-Mail Address: \_\_\_\_\_

Race Classification:

**Kid's Jaunt**

**Classic**

**Skate**

**Continuous Pursuit**


**1 km**

**6 km**

**6 km**

**6 km x 6 km**


**16 km**

**16 km**

**16 km x 16 km**

**Entry Fees:**

	<b>Prior to 12/20/09</b>	<b>Prior to 1/30/10</b>	<b>Race Day</b>
<b>6 Km Events</b>	\$10.00	\$15.00	\$20.00
<b>16 Km Events</b>	\$15.00	\$25.00	\$30.00
<b>6km x 6km Pursuit</b>	\$15.00	\$25.00	\$30.00
<b>16km x 16km Pursuit</b>	\$25.00	\$40.00	\$45.00
<b>1 Km Kids Jaunt</b>	Free	Free	Free
<b>Extra Lunch</b>	\$5.00	\$5.00	\$5.00

**Family Rate: The first Two entries are full price, then any additional entries are 1/2 price. All Family entries must be received at the same time to qualify.**

Mail entry form payment to:

Brainerd Nordic Ski Club

P.O. Box 927

Brainerd, MN 56401

**ATHLETE'S RELEASE: ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AND RELEASE**

I, \_\_\_\_\_, know that nordic skiing is an action sport carrying significant risk of personal injury, death, or property damage. I also know that there are natural, mechanical, and environmental conditions and risks which independently or in combination with my activities may cause property damage or severe/fatal injuries to me or others. I agree that I alone am responsible for:(a) my safety while participating in competitive events and,(b) providing, maintaining, and utilizing that equipment necessary for the safe enjoyment of my participation in such events and specifically acknowledge that the following persons or entities including the ski area, the promoters, the sponsors, the organizers, the officials, and any agent, representative, officer, director, employee, member, or affiliate of any person or entity named above are not responsible for my safety. I specifically RELEASE and DISCHARGE, in advance, those parties from any liability whether they now be known or unknown. I further agree to forever HOLD HARMLESS and INDEMNIFY all persons and entities identified above, generally and specifically, from any and all liability for death, personal injury, or property damage, resulting in any way from my participating in competitive events or training for competitive events. I currently have, and I agree to maintain throughout the time that I train and compete, valid medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities from providing this coverage for me. I agree that I will accept and abide by the rules and regulations of U.S.S.A. and any other rules and regulations imposed by the organizers of any particular competition. This Acknowledgement and Assumption of Risk and Release shall be binding upon my heirs and assigns.

**PHOTOGRAPHY RELEASE**

I hereby grant absolute right and permission to the Brainerd Nordic Ski Club to use Photographic portraits of me for illustration, promotion, or advertising purposes.

Name: \_\_\_\_\_

In Case of Emergency, Please Notify: \_\_\_\_\_ Phone: \_\_\_\_\_

**SIGN HERE X** \_\_\_\_\_ **Date:** \_\_\_\_\_

(If the athlete is less than 21 years of age and a resident of West Virginia, Alabama, Mississippi, Nebraska, Pennsylvania, or Wyoming, or less than 18 years of age and a resident of any other state, then a parent or guardian must sign below.)

This is to certify that, as parent/guardian of this participant, I do consent to his/her agreement to be bound by each of the terms and conditions identified above.

Parent/Guardian Signature: \_\_\_\_\_ Relationship: \_\_\_\_\_ Date: \_\_\_\_\_

**MUST BE SIGNED OR WILL NOT BE PROCESSED!  
NO REFUNDS OR TRANSFERS FOR ANY REASON, INCLUDING RACE CANCELLATION!**