



Wheelchair
Grand Prix



Registration Form

VYP Wheelchair Grand Prix – October 7, 8 & 9, 2005

- Yes, I would like to be a part of a team.
- Yes, I am a part of _____ team.
- I cannot be a part of a team, but would like to volunteer.

Complete this form and return it to:

Jennifer L. Hammerstrom, Variety the Children's Charity
Three Penn Center West, Suite 229
Pittsburgh, PA 15276-0112

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ - _____ - _____

Email: _____

Age: _____

Sex: male female

T-shirt size (circle one): S M L XL XXL

In consideration of the acceptance of my entry into the 2005 Wheelchair Grand Prix, I, the undersigned, assume full and complete responsibility for any injury or accident which may occur during my participation in the event or while I am on any premises used therefor. I hereby release and hold harmless Variety the Children's Charity of Pittsburgh, Variety Young Professionals, and all sponsors, promoters, donors, volunteers and other persons and entities associated with the event and their agents or employees. I will not enter and participate in the WGP unless I am medically fit. If I am under 18 years of age, my parent or guardian (as evidenced by his/her signature below) permits Variety, VYP and their volunteers to consent and/or provide emergency medical treatment, administer daily medications, treat minor illnesses/injury, and transport me if they deem necessary. I assume the risk associated with this event, all such risks being known and appreciated by me. I grant my permission to Variety and VYP to distribute now or in the future, any filmed or recorded material involving me. Said material may be distributed to anyone, for any purpose, including the general public, magazines, newspapers, television, or radio stations. I specifically authorize Variety and VYP now or at any time in the future, to publicize my name and forever discharge Variety and VYP from and against any and all claims, of any type, which arise from, or are related to, Variety's use, distribution, or disclosure of any photographs, films, videotapes, electronic recordings or other information, regarding Variety or VYP and me. I waive the right to inspect publications or products that include me prior to their release. I further grant my permission to Variety and VYP to attach temporary signs to any vehicle I may use to participate in the Wheelchair Grand Prix.

I have read the foregoing and certify my agreement by this signature:

Signature: _____

Date: _____

Signature: _____
(guardian's signature if under 18)

Date: _____