



REGISTRATION

Don't want to register online? No problem! Fill out this form, sign the waiver, and bring them with you to the event. Registration forms and waivers will also be available during check-in on March 7.

Plunger's Name: _____ Team Name (if applicable): _____

Address: _____

Phone Number: _____ Email: _____

Emergency Contact Name: _____ Emergency Contact Phone Number: _____

Participant Type (please check one): Adult: \$40.00 Youth (under 16): \$25.00 Virtual: \$15.00

How would you like to pay? Cash enclosed Check enclosed (payable to NHSPCA) MC VISA AMEX DISCOVER

Credit Card Number: _____ Security Code: _____ Exp. Date: _____

Signature: _____

WAIVER OF LIABILITY

(ALL participants are required to sign this Waiver of Liability. It must be signed by the individual, or a parent or guardian, if a minor.)

I hereby agree to abide by the rules and regulations governing this event and understand that there are risks associated with participation in this event as well as traveling to and from the site. In consideration of my participation as evidenced by my signature below, I hereby for myself, my heirs and administrators assume any and all risks which might be associated with this event and waive and release any and all rights and claims for damages which I may have against the New Hampshire SPCA, the Town of New Castle, event sponsors, workers and any other connected with organizing the NHSPCA Doggie Paddle Plunge, their representatives, successors and assignors for any and all injuries or loss of personal property by theft or otherwise damages or any kind whatsoever suffered by me as a result of taking part in this event and any other related activities. In further consideration of participating in New Hampshire SPCA Doggie Paddle Plunge, I represent that I understand the nature of the plunge and that I will be exposed to cold weather and water and that I and or my minor child am in good health, qualified and in proper physical condition to participate in such activity. I assume all responsibility and waive, release, indemnify and hold harmless New Hampshire SPCA, the Town of New Castle, event sponsors, workers and any other connected with organizing from any illness, medical condition or injury that may occur. I agree and represent that if I and/or my minor child believe any event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the event.

I further grant full permission for the event organizers to record any or all of my participation in the event for photos, motion pictures, TV recordings, videotapes and other media and to use them in any manner for publicity, promotions, advertising or commercial purposes without notification or reimbursement of any kind.

Signature of Participant: _____ Date: _____ Age (if under 18): _____
(For Minors, Signature of Parent or Guardian)