

2018 Irish Festival Bed Race Application

Saturday, March 17, 2018

Race begins at 10:30 am. on McEwan Street/7th street(Mercantile Bank lot)

Registration and line up begin at 9:00 am at Mercantile Bank Lot

No registration fee.

Course will run on east side of McEwan from 7th Street to 5th Street.

Parking: Will be available at Mercantile Bank and on 7th Street

Bed Rules and Requirements:

1. Must have 4 wheels.
 2. Rider must wear a helmet.
 3. Must have 4 push bars
 4. Must complete waiver on reverse side of this form
- Decorations and costumes are encouraged!

Prizes will be awarded for: Fastest Team, Last Place, Best Decorated, and Funniest.

Registration:

Company or Team Name: _____

Pusher 1: _____

Pusher 2: _____

Pusher 3: _____

Pusher 4: _____

Rider: _____

Team Captain Contact Info:

Name: _____

Address: _____

City: _____ **Zip:** _____

Phone: _____ **E-mail:** _____

To submit your application and/or for more information, contact:

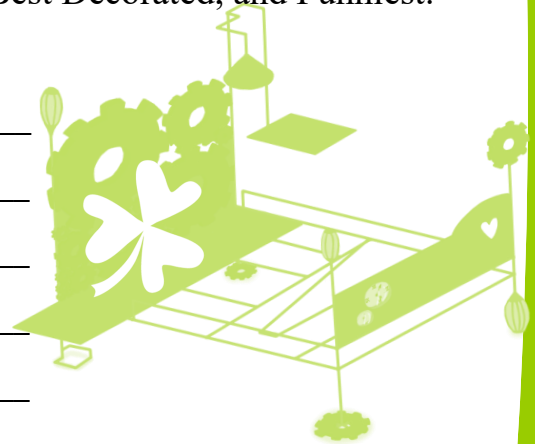
Clare Area Chamber of Commerce

202 W. Fifth Street

Clare, MI 48617

Phone: 989-386-2442

E-mail: events@claremichigan.com



Company/ Team Name: _____

Waiver of Liability:

I realize that the Irish Bed Race requires physical conditioning and I realize that I am in good medical condition. I understand that racing can be a hazardous activity that has dangers and risk of injury. I agree to release the sponsors and promoters of the race, including the Clare Area Chamber of Commerce, the city of Clare, and/or sponsors or affiliated organizations and their respective agents, directors, officers, employees, and volunteers from any and all responsibility or liability for injuries or damages which result, either directly or indirectly, from my participation in the race.

I am aware that this is a release of liability and I am signing it freely and of my own accord and I recognize that it is binding. I have carefully read this release of liability and fully understand and agree to its contents.

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____

Parental Permission:

I hereby give my permission for my child to participate in the Irish Festival Bed Race and I have read and agree, on behalf of my child, to the waiver of liability provisions set forth above. I certify that my child is between the ages of 15 and 17 years old.

Parent of: _____

Signature: _____ **Date:** _____

Parent of: _____

Signature: _____ **Date:** _____

