



## Participant Registration and Release of Liability

Name \_\_\_\_\_ Age \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

What is your level of Kiting: \_\_\_\_\_

Long Term Goal for Kiting: \_\_\_\_\_

What can the KB4girls Chapter Program do for you: \_\_\_\_\_

I am an amateur or professional athlete in good standing and health, of sufficient ability to safely participate in this kiteboarding event or clinic and try kiteboarding products. I certify that the information on this application, as entered by me, is true and correct. I acknowledge that kiteboarding is an inherently dangerous activity in which I participate solely at my own risk, and I, for myself and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release, indemnify and forever hold harmless, KB4girls and all associated local sponsors, partners, manufacturers, retail stores, hotels, resorts, kiteboarding schools, city and county agencies, their officers, officials, agents and/or employees, and if applicable owners and lessors of premises used for the activity, with respect to any and all injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the full extent permitted by law. I am 18 years of age or older and I have read this release of liability and assumption of risk agreement, fully understand that I have given up substantial rights by agreeing and accept it freely and voluntarily without any inducement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Place and Date

### For under 18 year old participants:

Are you 18 years or younger? \_\_\_\_\_ If yes, how old \_\_\_\_\_

Name of participant \_\_\_\_\_

Name of parent of participant: \_\_\_\_\_

Signature of legal guardian or parent \_\_\_\_\_