

Step # 1 Registration Form

Last Name _____

First Name _____

Address _____

City _____

State _____ Zip Code _____

Phone Number _____

Email _____

(If under 18)

Parent Name _____

Parent Email _____

- I am a Solo Jumper (\$100 min)
- I am a Special Olympics Athlete(Still needs to meet min).
- I am part of a team (\$50 ea. min).

Team Name: _____

- I am raising money for a Special Olympics Local Program.

City/Town: _____

Long Sleeve T-shirt Size: S M L XL XXL

please circle one



Step # 2 Sign Waiver

In consideration of participating in the Jackalope Jump I represent that I understand the nature of Jackalope Jump events and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I and/or my minor child believe event conditions are unsafe, I and/or my minor child will immediately discontinue participation in the Activity.

I fully understand that a Jackalope Jump involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I and/or my minor child incur as a result of my and/or my minor child's participation in the Activity.

I hereby release, discharge, and covenant not to sue Special Olympics, Inc., Special Olympics Wyoming, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releases" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the releases from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

A signed original of this waiver must be on file prior to participating in the Jackalope Jump.

Printed Name of Participant

Signature of Participant

(Only if age 18 or over)