



Lincoln Fish-n-kids Fishing Derby

DERBY FISHING MENTOR/VOLUNTEER REGISTRATION FORM

NAME: _____
Last First Middle

ADDRESS: _____
Street

CITY: _____ STATE: _____ ZIP: _____

ORGANIZATION REPRESENTED (IF APPLICABLE): _____

PHONE(____) _____ DOB: _____

CELL: (____) _____ E-MAIL: _____

Allergies to drugs or foods: _____

Any special medications, important medical info/or special instructions?:

List any restrictions to medical treatment: _____

Physician/HMO Name: _____ Phone: _____

EMERGENCY CONTACT PERSON: _____ PHONE: _____

VIDEO-PHOTO RELEASE

I understand that during any activities associated with the production and presentation of the Fish n’ Kids Fishing Derby program co-presented by the KIWANIS Club of Lincoln, Lincoln Police Activities League (CA Police Activities League), Lincoln Hills Fishing Group, and Big M Fishery that my photograph and/or the photograph of me may be taken by the Lincoln Fish n’ Kids Derby staff, producers, sponsors, organizers, and/or assigns. I agree that my photograph and/or the photograph of me, including video photography, film photography, or other reproduction of my likeness or the likeness of me, may be used without charge by the Lincoln Fish n’ Kids Fishing Derby, Lincoln Kiwanis, Lincoln Police Activities League (CA Police Activities League), Lincoln Hills Fishing Group, Big M Fishery, their producers, sponsors, organizers and/or it’s assigns for such purposed as they deem appropriate.

AUTHORIZATION TO TREAT FOR MEDICAL EMERGENCY

I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power to render care which the aforementioned physician, in the exercise of his/her best judgment, may deem advisable for me. I do hereby authorize and consent to any X-ray examination, anesthetic, medical, or surgical treatment rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medical Practice Act or a Dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital or emergency care facility holding a current license to operate a hospital or emergency care facility from the State of California Department of Public Health. Further, I understand I will be participating in inherently dangerous activities and agree to pay for my medical expenses. I understand that all effort shall be made to contact my family / heirs prior to rendering treatment, but any of the above treatment will not be withheld if they can not be reached. This authorization is given pursuant to the provisions of the California Civil Code.

RELEASE FROM LIABILITY

In consideration of the acceptance of the application of my participation in the program and/or activities of the Lincoln Fish n' Kids Fishing Derby co-presented by the KIWANIS Club of Lincoln, Lincoln Police Activities League (CA Police Activities League), Lincoln Hills Fishing Group, Big M Fishery, the Derby's producers, sponsors, organizers, etc., I hereby agree to assume all risks attendant upon myself while participating in the Lincoln Fish n' Kids Fishing Derby, and/or any activities associated with the production and presentation of the Derby. I and my heirs hereby waive, release, and discharge any and all claims for damages for death, personal injury, or property damage which I may have, or which may hereafter accrue to me as a result of my participation in the Lincoln Fish n' Kids Fishing Derby, and/or any activities related to the production and presentation of the Derby. I agree to indemnify and hold harmless from liability the Lincoln Fish n' Kids Fishing Derby, KIWANIS Club of Lincoln, Lincoln Police Activities League (CA Police Activities League), Lincoln Hills Fishing Group, Big M Fishery, their producers, sponsors, organizers and/or any of their agents, servants, or employees by reason of any accident, death, injury, or damages, to persons or property which I or my heirs may suffer while participating in any programs and/or activities related to the presentation of the Lincoln Fish n' Kids Fishing Derby. This release is intended to discharge in advance the Lincoln Fish n' Kids Fishing Derby, KIWANIS Club of Lincoln, Lincoln Police Activities League (CA Police Activities League, Lincoln Hills Fishing Group, Big M Fishery, their producers, sponsors, organizers and/or any of their agents, servants, or employees by reason of any accident, death, injury or damages to persons or property which I suffer, from and against any and all liability arising out of or connected in any way with my participation in any activity associated with the production of the Derby even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to assume all responsibility for any property damage or injury to any person caused by me while participating in any activities related to the production and presentation of the Lincoln Fish n' Kids Fishing Derby co-presented by the KIWANIS Club of Lincoln, the Lincoln Police Activities League (CA Police Activities League), Lincoln Hills Fishing Group, and Big M Fishery.

I have read, understand and approve the AUTHORIZATION TO TREAT FOR MEDICAL EMERGENCY (with any restrictions I may have listed above), RELEASE FROM LIABILITY and the VIDEO-PHOTO RELEASE.

X _____
PRINT NAME OF PARTICIPANT DATE

X _____
SIGNATURE OF PARTICIPANT IF ADULT OR SIGNATURE OF PARENT(S) IF UNDER 18
08/10/08