



## Burlington Endurance Athletic Sports Team (BEAST)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Age: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Birth date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ T-Shirt Size: S M L XL 2X

Emergency Contact (name/phone number): \_\_\_\_\_  
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Swimming: \_\_\_ Beginner \_\_\_ Intermediate \_\_\_ Advanced

Bicycling: \_\_\_ Beginner \_\_\_ Intermediate \_\_\_ Advanced

Running: \_\_\_ Beginner \_\_\_ Intermediate \_\_\_ Advanced

What are your main interests?

What do you want out of the club?

Are you interested in finding a group to run, bike or swim with?

What types of guest speakers would you like to see the club offer?

This form can be dropped off at the YMCA along with your dues, payable to Team Beast, or you can mail to PO Box 321, Burlington, IA 52601.

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT (“AGREEMENT”).

In consideration of acceptance of application for membership or of my being permitted to take part in any event of which Burlington Endurance Athlete Sports Team (BEAST) is associated with, I, for myself, my heirs, executors, administrators, successors and assigns, waive, release and discharge all claims for damages resulting from death, personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my participation in this event. I understand this release is intended to discharge and release, in advance, the Burlington Endurance Athlete Sports Team, its members and their respective agents, officers, officials, servants and representatives and any involved municipalities and their respective agents and employees from and against any and all liability arising out of or connected in any way with my participation in the event even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.\_\_\_\_\_

I understand that serious accidents occur during bicycling, swimming, running and related activities. I further understand that participants in such events occasionally sustain serious personal injury, death and/or property damage as a consequence of that participation. For example, and for the purposes of example only, I am aware that a bicycle may impact another and that the rider may fall and be injured as a result, a swimmer may sustain injury in the open water by a fishing boat, or slip on a pool deck, a runner may trip over debris and sustain injury and that being present at an event where people participate in athletic events, those people may collide with others. Nevertheless, knowing the risks of participating or being present during a swimming, bicycling, running or related activity, I, for myself, my heirs, executors, administrators, successors and assigns hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who, through their negligence or carelessness, might otherwise be liable to me for damages.\_\_\_\_\_

I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE BURLINGTON ENDURANCE ATHLETE SPORTS TEAM AND SIGN IT OF MY OWN FREE WILL. PRIOR TO THIS AGREEMENT’S EXECUTION I MAY CONSULT WITH AN ATTORNEY. I ACKNOWLEDGE THAT BY SIGNING THIS AGREEMENT I MAY BE SURRENDERING CERTAIN LEGAL RIGHTS.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**For persons under 18 years of age, a parent or legal guardian must sign the above Agreement and complete the following section.**

The undersigned \_\_\_\_\_ (parent/guardian) the parent and natural guardian of \_\_\_\_\_ (minor’s name) hereby acknowledges that he/she has executed the foregoing Agreement for and on behalf of the minor named herein. As the natural or legal guardian of such minor, I hereby bind myself, the minor and our executors, administrators, heirs, next of kin, successors and assigns to the terms of the foregoing Agreement. I represent that I have the legal capacity and authority to act for and on behalf of the minor named herein, and I agree to indemnify and hold harmless the persons or entities mentioned in the foregoing Agreement for any claims made or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the foregoing Agreement or in the execution of the Consent.

**NOTE: Parent/Guardian must also sign Agreement above.**\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Relationship to Minor \_\_\_\_\_ Date \_\_\_\_\_