

5th Annual Williamsport WW II Weekend

October 12, 13, 14, 2012

PARTICIPANT INFORMATION

Name:		
Unit Affiliation:	Please check one: Allied <input type="checkbox"/> Axis <input type="checkbox"/>	
Home Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	
Email:		
Medical Limitations and/or Concerns:		

EMERGENCY CONTACT INFORMATION

Name:	Relationship:
Phone Number:	

PAYMENT INFORMATION

Payment Method:	Please check one:	Check <input type="checkbox"/> Money Order <input type="checkbox"/>
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- **Registration fee is \$5.00.**
- **Please make Checks or Money Order payable to: Williamsport WW II Weekend**

Please check when completed:

- Registration Form
- Check or Money Order Enclosed
- SIGNED Hold Harmless Agreement & Waiver and Release of Liability

Please mail ALL completed items mentioned above to:

Williamsport WW II Weekend
P.O. Box 331
Williamsport, MD 21795
Attn: Mr. Kim L. Bowers

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HOLD HARMLESS AGREEMENT & RELEASE AND WAIVER OF LIABILITY

I, the undersigned, **DO HEREBY ACKNOWLEDGE** that as a participant in the World War II Weekend event, I freely and voluntarily engage in a hazardous activity for my own recreation, enjoyment and pleasure. I recognize that, as a part of this activity, other participants and I may traverse difficult terrain and obstacles; temporarily occupy, enter and egress through abandoned buildings that may be in a variety of physical conditions; transport and care for explosive materials and devices; enter, exit, ride and use military type vehicles; transport and use various firearms and other weapons; and freely and voluntarily assume any and all risk of injury that such activities involve.

For these reasons, I HEREBY waive and release from liability and agree to hold harmless the following:

- 1. The Town, Mayor and Council and Museum Board members of Williamsport Maryland**
- 2. Mr. Kim L. Bowers, Event Coordinator, of Williamsport, his relations, heirs, agents and/or representatives; and**
- 3. All owners and operators of participating vehicles, both modern and vintage that may be used to transport and move personnel on and about the location of this event, and/or that are utilized as part of the event's activities.**

for any and all damages of any kind or nature to my person and property arising out of or resulting from my direct or indirect participation in this event. I desire to participate at my own risk. I further represent that I will follow the event's Rules and all precautions necessary thereto.

I further state that I am in good health, physically fit to engage in this activity and have no medical condition which could foreseeable jeopardize my safety during my participation or be aggravated by such participation. By signing this document, I hereby acknowledge that I have fully read and understood its contents and that I am voluntarily waiving rights that may be granted to me by Federal, State and Local statutes.

Signature of Participant

Date _____

No one under age 16 will be permitted to use firearms