

**FOR OFFICE USE ONLY:**

Event: Relay For Life of Redmond/Kirkland

Location/Activity Code: GWWKINRFL07

Youth Roster & Release Form

Relay For Life of Redmond/Kirkland 2014

Welcome to the American Cancer Society's Relay For Life! We hope you'll have a great time as you raise money and help fight cancer. This form **must** be completed and returned to your American Cancer Society by **June 4th, 2014** in order to participate. For this event, a youth is considered anyone age 18 or under.

Name	Birthdate	T-Shirt Size
Address		
City	State	Zip
Phone ()	Email	
Team Name	Team Captain's Name	
Chaperone's Name	Chaperone's Phone Number	
Chaperone's Name (2)	Chaperone's Phone Number	
Cancer Survivor?	This is my ____ year participating in Relay For Life	
Parent/Guardian Name	Parent/Guardian Phone	

Ground Rules for Participants

1. Respect • Many people of all ages and medical conditions will be sharing the same space at Relay, so it's important to act politely and respectfully. Do not use rude words or gestures. Treat others the way you would want to be treated. If someone complains about something you say or do, you'll receive a warning. If it happens again, a parent or guardian will be called and asked to come pick you up.

2. Responsibility • Your chaperone is responsible for you, and must know where you are at all times. If you need to leave the Relay site at any time, tell your chaperone where you are going. And please notify your chaperone if you have any concerns about appropriate behavior, or if you have any medical needs.

3. Be a good Neighbor • Quiet hours begin during the Luminaria Ceremony and continue until sunrise. Please be respectful of your noise level during these hours and be aware that only registered participants will be allowed at the track during these hours.

4. Keep promises • Your team is counting on you! If you sign up to bring something, make sure you do. And walking on the track when you say you will is both a responsibility and lots of fun!

5. Be Substance-Free • The use or possession of illegal drugs, weapons, alcohol, or tobacco products at all Relay For Life events is strictly prohibited.

6. FUND-Raise • Remember that Relay For Life is an activity to raise funds for the American Cancer Society. Whether you raise funds as a team or individually, it will be fun, easy, and rewarding!

7. Don't Pollute • At most Relay events, there is no food allowed on the track. Please eat elsewhere and keep your tent area clean and garbage free.

I have reviewed the Relay For Life ground rules and agree to abide by them.

Youth Participant's Signature

Date

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Parental Response Form

Ground Rules, Waiver and Release

In the event of an emergency, it might be necessary to reach a parent or guardian. Please print his or her name and phone number on the line below.

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Telephone: _____

Ground Rules

I have read and reviewed the Ground Rules for participation (opposite page) with my child. I am aware that if the rules are violated, the American Cancer Society Staff, in their sole discretion, may terminate participation at any time, and I will be contacted and required to provide transportation home.

Parent/ Legal Guardian Signature

Date

Waiver and Release

I understand that there are risks involved in participating in any exercise event, including the Relay For Life. In signing this release for myself or the name entrant (if entrant is under the age of 18, then a parent or guardian must sign), I certify that I, or the named entrant, agree to assume all risks, including, but not limited to, risks of negligence, by participating in the Relay For Life.

I am aware the American Cancer Society does not provide medical or any other kind of insurance to participants. I intend to be legally bound, do hereby for myself, my heirs, executors, and administrators, waive and release all rights and claims for damages I might accrue against the American Cancer Society, its members, staff, volunteers, affiliates, sponsors, the facility of the event, and their successors, representatives and assigns, for any and all injuries suffered by me while traveling to and from and participating in the Relay For Life.

I understand that I am participating voluntarily and will adhere to all the rules.

Parent/ Legal Guardian Signature

Date

Emergency Contact Information (In addition to the above parent/guardian information)

Emergency Contact Name: _____

Emergency Contact Telephone: _____

Emergency Contact Relationship to Minor: _____