



Spike's CHALLENGE RACE

C-2 Entry Form

Race Coordinators, John & Cheryl Lucey
 3979 E Beaver Island Rd, Grayling MI, 49738
 (989) 390-4101
johnlucey@ymail.com e-mail

Amount Paid _____
Canoe # _____
X the box if E2 Team E2
<i>For Committee Use Only</i>

AuSable River, Grayling, Michigan
 July 17-18, 2021

C-2 Sprints Saturday, July 17th, 2021 9:00 AM (Grayling City Park Pond & Pavilion)
 C-2 Purse \$4100 Sunday, July 18th, 2021 9:00 AM (Joe Wakeley's)
 Awards At City Park Sunday July 18th, 2021 1:30 PM

Contestant #1	Contestant #2
Printed Name _____	Printed Name _____
Street Address _____	Street Address _____
City _____ State & Zip _____	City _____ State & Zip _____
Date of Birth ____/____/____ Age _____	Date of Birth ____/____/____ Age _____
Male ____ Female ____ Shirt Size S M L XL XXL	Male ____ Female ____ Shirt Size S M L XL XXL
MCRA Canoe # C-2 _____	MCRA Canoe # C-2 _____

<input type="checkbox"/> C-2 Race Expert \$40/Team Entry <input type="checkbox"/> C-2 Race Expert Div II \$30/Team Entry <input type="checkbox"/> C-2 Race Junior or Fledgling \$5/Team <p style="text-align: center;">Please check the appropriate boxes above.</p> <p>\$ _____ Total Amount Enclosed</p>

Please send to Spike's Canoe Race, 3979 E Beaver Island Rd, Grayling, MI 49738
Early entries are very much appreciated. It helps us to pay some of the expenses prior to the event and allows the race organizers to stuff prize envelopes prior to race day.

The undersigned waves any and all rights to claim against the officers, and individuals of the M.C.R.A., the officials and committee members of The Spike's Challenge Race, Spike's Keg 'O' Nails, and any landowners on or bordering the AuSable River, both individually and severally and acknowledges that the above organization are assuming no responsibility to the undersigned. The undersigned hereby acknowledges the inherent danger in all water sports and attest to his/hers understanding of and agreement to abide by the safety rules and regulations of the M.C.R.A. and A.C.A. Any disputes will be finalized by the committee, and or the M.C.R.A. board members.

By _____ Date _____ By _____ Date _____
 Parent/Guardian _____ Date _____ Parent/Guardian _____ Date _____

Awards Ceremony and lunch will occur at City Park, following the C-2 race on Sunday.

Please support Spike's KEG 'O' NAILS, your Spike's Challenge Race Sponsor.



SPIKE'S CHALLENGE

July 17-18th, 2021

AMATEUR ATHLETIC RELEASE OF LIABILITY WAIVER

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from participating in the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS **PADDLESPORT RISK MANAGEMENT, LLC; MICHIGAN CANOE RACING ASSOCIATION, JOHN & CHERYL LUCEY; JOE WAKELEY; OLD AUSABLE FLY SHOP; SPIKES RESTAURANT; CITY OF GRAYLING** their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises used to conduct the event ("RELEASEE'S"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me in my participation in, and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of these activities, and/or in the promotion of this event, its location, other sporting events, sport in general, and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLEASE COMPLETE ALL SECTIONS

(Participant Name: PLEASE PRINT) Address: _____

Email Address: _____ Emergency Contact Name: _____
Phone: _____ Phone: _____
Signature: _____ Date: _____

FOR PARTICIPANTS OF MINOR AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasee's, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasee's from any and all liabilities incidental to my minor child's involvement or participation in the programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S, to the fullest extent permitted by law. I further agree to the photographic and video release set forth above.

Parent/Legal Guardian Name & Address: (PLEASE PRINT) _____ Minor DOB: _____
Address: _____ Emergency Contact # _____
Signature of Parent/Legal Guardian: _____ Date: _____