



Registration Form

Parent/Guardian Information:

First Name _____ Last Name _____

Email Address _____

Home Address _____

Race Participant Information:

First Name _____ Last Name _____

Team Name (if applicable) _____

Birthdate: ____/____/____ Age _____ Gender: Male Female

Do you want your race to be timed? Yes No

T-Shirt size (Circle one): Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large

Emergency Contact Name _____

Emergency Contact Phone Number _____

How did you hear about us? _____

Waiver:

By signing this form, I, the undersigned for myself and/or the parent/guardian of the minor mentioned above, acknowledge that this sporting event affiliated with Dirty Scurry or QOV Global Wellness Incorporated or Cook Children's may lead to inherent risks, dangers and hazards, foreseeable and unforeseeable which may result in serious injury, illness and death. I also acknowledge that this sporting event, as well as others that I and/or the above mentioned minor choose to participate in will be an extreme test of our physical and mental limits.

With full knowledge of the facts and circumstances surrounding this and other Dirty Scurry or QOV Global Wellness Incorporated or Cook Children's events, I agree that my child, family, agents, contractors nor myself will make a claim against, sue, attack the property of or prosecute Dirty Scurry or QOV Global Wellness Incorporated or Cook Children's, their agents, sponsors, building contractors, suppliers, contracted personnel and employees; furthermore, I waive, release and discharge the entities mentioned above, from any and all liability for my and/or the above mentioned minor's death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including attorney's fees and litigation costs. I will indemnify and hold harmless the previously mentioned entities from any all liabilities or claims made as a result of participation in sporting or other events associated with Dirty Scurry or Green Global Wellness Incorporated or Cook Children's whether caused by the negligence of releases or otherwise.

I understand that photos or videos may be taken during this activity for promotional purposes. It is also understood that should I and/or the above mentioned minor decline to participate and attend, a refund for any expenditures incurred will not be refunded and I will settle any unpaid debts which may have been incurred on my and/or above mentioned minor's behalf.

Parent/Guardian Signature _____ Date _____

Individual Entry Fee: \$20

Team Entry Fee: \$20

Please make checks payable to "Dirty Scurry."

Mailing address:

PO Box 692 Fort Worth, TX 76101