

Bib # _____; Partner Bib # _____
Amt. Paid: _____; How Paid: _____
Skier Class: _____

ANCHORAGE



PARKS & RECREATION



# FIRST ANNUAL TEAM SPRINT ROLLER SKI RACE SATURDAY, JULY 28, 2007

An Anchorage Parks & Recreation Event  
PART OF THE 2007 SUMMER CLASSIC ROLLER SKI SERIES

Location: Anchorage Daily News Parking Lot  
1001 Northway Drive

Race Day Registration and Bib Pickup 3:30 – 4PM  
First Race Starts at 5pm

**MEN AND WOMEN TEAM DIVISIONS**

**TEAM = 1 CLASSIC AND 1 SKATE SKIER**

**(IF YOU DON'T HAVE A PARTNER, WE'LL GIVE YOU ONE)**

**NO SKATE SKIS FOR CLASSIC LEG – NO YELLOW WHEELS**

**HELMETS REQUIRED**



Entry Fee = \$20  
Juniors (YOB 1990-1993) \$15  
Youth (YOB 1994 or later) \$10

Bring this completed form and entry fee to race  
(Or: Submit to Jan Buron)

Name: \_\_\_\_\_ Teammate: \_\_\_\_\_

Email: \_\_\_\_\_; Sex: M F Year of Birth: \_\_\_\_\_

Club/School/Other Affiliation: \_\_\_\_\_

Type of Credit Card: Visa Mastercard Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Card No: \_\_\_\_\_

## WAIVER

I understand the risks and dangers inherent in rollerskiing and rollerski racing. I, for myself, my heirs, representatives, and minor child: (1) accept and assume all such risks; (2) release and discharge the Municipality of Anchorage, Alaska Winter Stars, Anchorage Daily News, and their respective officers, directors, owners, employees, agents, sponsors, race officials and volunteers from any and all claims based on accidents or injuries, including death, directly or indirectly connected with this activity; and (3) waive and covenant not to hold any of the above-mentioned parties responsible for any personal or property damage arising out of my, or my minor child's participation in the roller ski race. I hereby authorize emergency medical care by either our family doctor or available physician.

I agree, without any right to payment or of editing, to the use of images of me and/or my child, including reproductions of photo, video, or other reproductions, by the Municipality of Anchorage for dissemination in all types of media for public purposes.

Signature of Racer \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent or Guardian if Racer under age 18 \_\_\_\_\_ Date: \_\_\_\_\_