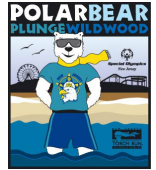




2010 REGISTRATION FORM POLAR BEAR PLUNGE WILDWOOD



REGISTER or SPONSOR A PLUNGER @ NJPOLARPLUNGE.ORG

REGISTER EARLY BY MIDNIGHT, 12.31.09 and you will receive a Polar Bear Plunge hooded sweatshirt & a Polar Bear Plunge Hat. Teams of 10 must be registered by 1.13.10.

REGISTRATION AND DONATIONS WILL CLOSE AT MIDNIGHT, 1.13.10.

Register as an Individual or Team. Please Print Clearly.

I AM REGISTERING AS AN INDIVIDUAL

PLUNGER:

First Name Initial Last Name

Address: _____

City: _____ St _____ Zip _____

County: _____

Phone: _____ - _____ - _____ Ext. _____ (H) (W) (C)
(circle one)

Email: _____

Gender: M / F (circle one) Age: _____ Date of Birth: ____ / ____ / ____

I AM REGISTERING AS PART OF A TEAM OF 10

Teams of 10 or more

TEAM NAME:

I AM THE TEAM CAPTAIN (hands-in donations, picks-up wristbands, plunger gift cards, etc. and distributes to the team at **TEAM REGISTRATION** the day of the Plunge.)

TEAM PLUNGER:

First Name Initial Last Name

Address: _____

City: _____ St _____ Zip _____

County: _____

Phone: _____ - _____ - _____ Ext. _____ (H) (W) (C)
(circle one)

Email: _____

Gender: M / F (circle one) Age: _____ Date of Birth: ____ / ____ / ____

How many years have you plunged? (If this is your first, write 0)

I am a: Law Enforcement Officer Special Olympics Athlete

DEPOSIT Mailed ____ / ____ / ____ (date)

Check/MO # _____
No cash or credit card payments via mail

Amount \$ _____ Minimum deposit of \$25 counts towards the \$100 donation per person to Plunge.
Additional items may be earned (see *Plunger Incentive* information).

HOODED SWEATSHIRT SIZE
Please circle ONE - Adult sizes only

S M L XL XXL XXXL

If size is not specified, XL will be given.

MAKE PAYABLE TO/MAIL TO: SPECIAL OLYMPICS NEW JERSEY • PLUNGE WILDWOOD, 3 PRINCESS RD, LAWRENCEVILLE, NJ 08648

♦ Questions? E-mail pbpinfo@sonj.org, call 609.896.8000 or visit NJPolarPlunge.org ♦

WAIVER - SIGNATURES REQUIRED: Special Olympics New Jersey Release and Waiver of Liability, Assumption of Risk, and Indemnity ("Agreement"): In consideration of participating in the Special Olympics New Jersey Plunge™ (Activity), (1) I represent that I understand the nature of Plunging events and that I and/or my minor child am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I and/or my minor child believe event conditions are unsafe, I and/or my child will immediately discontinue participation in the Activity. (2) I fully understand Plunging/Swimming events involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the Activity, the conditions in which the Activity takes place, or the negligence of the "Releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and (3) I fully accept and assume all such risks and all responsibility for losses, costs, and damages I and/or my child incur as a result of my and/or my minor child's participation in the Activity. (4) I hereby release, discharge, and covenant not to sue Special Olympics, Inc., Special Olympics New Jersey, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations; and (5) I further agree that if, despite this release, waiver of liability, and assumption of risk, I, or anyone on my and/or my minor child's behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost which any may incur as a result of such claim. (6) I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

SIGNATURE REQUIRED

Printed Name of Participant _____ Signature of Participant (Parent/Legal Guardian if under age 18) _____ Date: ____ / ____ / ____

By my participation in this event I am granting permission to you to use my name, likeness, voice and words in television, radio, films, newspapers, magazines, and other media, and in any form not heretofore described, for the purpose of advertising or communicating the purposes and activities of Special Olympics in appealing for funds to support such activities.

SIGNATURE REQUIRED

Printed Name of Participant _____ Signature of Participant (Parent/Legal Guardian if under age 18) _____ Date: ____ / ____ / ____