



Perchville USA 2015
Tawas Area Chamber of Commerce
P.O. Box 608, Tawas City, MI 48764
(989) 362-8643, www.tawas.com

POLAR BEAR SWIM ENTRY FORM

NAME _____

DATE OF BIRTH _____ AGE _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PLEASE SELECT WHICH POLAR BEAR SWIM YOU WILL PARTICIPATE IN:

SAT., FEB. 7 _____ 1:30 PM _____ 3:30 PM SUN., FEB. 8 _____ 1:30 PM

Have you participated in prior year Polar Bear Swims? If yes, how many years? _____

***NO ONE UNDER 16 YEARS OF AGE WILL BE ALLOWED TO PARTICIPATE
ENTRANTS 16 - 17 YEARS OF AGE MUST HAVE SIGNATURE OF PARENT/GUARDIAN***

RULES: No alcoholic beverages, displays of public misconduct and vulgar language will be permitted. Refunds will not be grant to those disqualified from participation.

WAIVER: I, the undersigned participant, acknowledge, agree and understand that: 1) I, voluntarily and of my own free will, elect to participate in the Polar Bear Swim. 2) I understand there are certain risks and hazards involved that may result in injury or death to me including, but not limited to hazards associated with weather conditions. 3) While changing areas are provided, I understand I am responsible for my own valuables. 4) I release, discharge, hold harmless, and agree not to sue the Tawas Area Chamber of Commerce, their employees or any Perchville USA 2015 Committee Members, sponsors, volunteers, for any claim, damages, costs or cause of action which I have or may in the future have as a result of injuries or damages sustained or incurred by me from whatever cause including but not limited to the negligence, breach of contract or wrongful conduct of the parties hereby released. 5) I understand that multimedia recordings (e.g., photographs, video) will be taken and that they may be used in suitable means as advertising or promotion of current and future events, including but not limited to social media sites.

SIGNATURE: _____ **DATE:** _____

PRINT GUARDIAN NAME: (if 16 or 17 years of age) _____

GUARDIAN SIGNATURE: _____ **DATE:** _____

Return form and payment of \$20 per person (make check payable to Tawas Area Chamber of Commerce) to: Tawas Area Chamber of Commerce, P.O. Box 608, Tawas City, MI 48764.

**Special Thanks to Our
Polar Bear Swim Sponsor**

