



FALLEN, BUT NOT FORGETTEN

***CHARITY EVENT TO BENEFIT
DEPUTY JOE MATUSKOVIC MEMORIAL FUND TRUST***

OCTOBER 17TH, 2015

HEATS START AT 8:30 AM

COST: \$30 PER PARTICIPANT

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Sex: M F (Circle One)

Email _____

Please CIRCLE one (No Credit Cards Accepted): CASH CHECK

Please CIRCLE Event Shirt Size:

(Availability is limited, please register by Monday, September 28th to ensure size.)

Men's Shirt Size: S M L XL XXL

Women's Shirt Size: S M L XL XXL

Please CIRCLE one: Rx SCALED TEAM Rx TEAM SCALED NEWBIES

LAW ENFORCEMENT TEAM Rx LAW ENFORCEMENT TEAM SCALED

Team/Partner Name: _____

Liability Waiver: Upon Acceptance of my own entry I, for myself, my heirs & assigns, hereby release the CrossFit Johns Island (DBA Nic's Garage LLC), its employees and any and all sponsors & officials of this event from any & all liability arising from illness, injury, or death I may suffer as a result of participation in this event. I attest that I am physically fit & have sufficiently trained for this event & I am aware that my participation could, in some circumstances, result in physical injury. Should officials determine that completion of this event would be injurious to my health, I consent to be removed and treated by a physician in attendance of his/her direction. I give permission for free use of my name and picture in any broadcast, telecast, or written account of this event.

I also understand that the entry fee is **NONREFUNDABLE FOR ANY REASON.**

Signature _____ Date _____

