**2025 Turkey Derby Race entry form**

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**Name Date**

**\_**

**Phone Email**

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**Signature of one Parent Parent Phone**

**Rules & Regulations**

**Entry Specifications**

* Open to all students enrolled in a Clay County High School.
* Dawn an inflatable turkey costume and take on your competitors, in a foot race, that is sure to make you smile…any everyone else! COSTUME PROVIDED!
* Turn in entries at the Caboose or email Kate Hopkins at claycountycoc@gmail.com no later than **MARCH 28TH, 2025.**
* Cash prizes will be awarded.
* **Contact:** For more information or questions contact Chamber office at 940-613.3193

I wish to participate in the Turkey Fest Clay County High School Turkey Derby. I understand that my execution of this Release of Liability and Registration is necessary to participate in Turkey Fest. If I am under 18 years of age at the time of registration, my parent or legal guardian has completely reviewed this Release of Liability and Registration, understands, and consents to its terms, and authorizes my participation by his/her signature below.

I will indemnify and hold harmless the Releasees from any and all liabilities, claims, injuries, and property damages, including attorney's fees, expenses, and court costs incurred in the defense of same, which may occur to or for myself, my child, other participants, and third parties as a result of my or my child's participation in Turkey Fest, including injuries and damages sustained as a result of the sole, joint or concurrent negligence, negligence per se, statutory fault, or strict liability of Releasees.

I consent to the use and publication of photographs taken by or for the Henrietta & Clay County Chamber of Commerce at Turkey Fest for promotional purposes. Commitment to Participant By signing this Release of Liability and Registration, I represent that I have read it, understand it, and am voluntarily signing it as my free act and deed.

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In case of emergency, contact

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent or Legal Guardian of Participant is under 18 years of age:**

Parent or Legal Guardian Signature:

Parent or Legal Guardian- Print Name:

In case of emergency, contact

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_