

**THE WOMEN IN THE WILD ADVENTURE CHALLENGE**

Saturday September 19th 2009

**Who should answer the call of the Wild?** Any reasonable fit woman can complete this rite of passage to be called a “Wild Woman” and experience the feel of personal victory that comes with such a challenge. Bring your friends, family, or coworkers and come join us for the 2<sup>nd</sup> Annual Women in the Wild Adventure Race.

**What does this Wild Woman Challenge Consist of?** The course itself is designed to be a beginner friendly adventure challenge race for those women who have never done an adventure race before, yet challenging enough for those who have. It consist of a 5 mile walk or run followed by a 12 mile bike ride and finishing with the wild woman challenge obstacle course in which your patience, strength, agility, balance, and mental power will be tested in these fun challenges.

**Starts:** Registration begins at 6:30 am. Challenge will start at 8:30 am

**General Information and Lodging:** Summer’s Best 2 Weeks at the Que is located at the former Bethco Pines Club on the Quemahoning Dam in Jenner Township. It is approximately a 20 minute drive from Johnstown.

For detailed directions log onto Summers Best 2 Weeks website: [www.SB2W.org](http://www.SB2W.org).

Women participating in this event can stay at the campgrounds for \$25.00 a night or stay both Friday and Saturday night for \$50.00. There will be events for women going on at the campgrounds all week long.

**Proceeds to benefit:** The YWCA of Greater Johnstown

**Contact:** Marcia Croce (Women in the Wild Adventure Challenge Event Coordinator): 724-248-9749

**Website:** <http://www.maradnet.com/wildwomen/ww09.html>

**PLEASE PRINT-fill out completely and sign waiver in back of application-one challenger per form**

NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE: \_(\_\_\_\_) \_\_\_\_\_ EMAIL \_\_\_\_\_

T-shirt size: S\_\_\_ M\_\_\_ L\_\_\_ XL\_\_\_ XXL\_\_\_

Early Bird Registration (Before April 30<sup>th</sup> 2009) \$40.00

Pre-registration by Sunday August 30th 2009: \$50.00 **\*\*\*NO REFUNDS AFTER JULY 31<sup>ST</sup> 2009\*\*\***

Registration after Sunday August 30th 2009: \$60.00 (T- shirt will not be guaranteed)

Day of Race: \$75.00 (No T-Shirt guaranteed)

I would like to stay at the campgrounds overnight:

Friday Sept 18<sup>th</sup> 2009 /\$25.00 \_\_\_\_\_ Saturday, Sept 19<sup>th</sup> 2009 /\$25.00 \_\_\_\_\_ Both Nights Sept 18<sup>th</sup> and 19<sup>th</sup> /\$50.00 \_\_\_\_\_

I would like to room with the following participants \_\_\_\_\_, \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_,

No, Thanks I do not wish to stay at the campgrounds \_\_\_\_\_

Make checks payable to: Women in the Wild Adventure Challenge

**Send to:**

YWCA of Greater Johnstown

C/O: Marcia Croce

526 Somerset Street

Johnstown, Pa 15901

**PLEASE MAKE SURE YOU SIGN RELEASE WAIVER IN BACK OR YOU WILL NOT BE ALLOWED TO PARTICIPATE IN THIS EVENT**

**YWCA OF GREATER JOHNSTOWN WOMEN IN THE WILD ADVENTURE RACE RELEASE WAIVER**  
**READ THIS DOCUMENT (THE "WAIVER AGREEMENT") CAREFULLY BEFORE SIGNING. THIS WAIVER**  
**AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS AND WILL LIMIT OR ELIMINATE YOUR ABILITY TO**  
**BRING A FUTURE LAWSUIT.** I understand and acknowledge that I am legally agreeing to the statements in the following paragraphs of this Waiver Agreement by affixing my signature below and that these statements are being accepted by the YWCA of Greater Johnstown. I acknowledge that a triathlon, duathlon, challenge or other multi-sport event (hereinafter "Event") is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property damage. I acknowledge and agree that it is my responsibility to determine whether I am sufficiently fit and healthy enough to safely participate in an Event, and I attest and certify that I am or will be sufficiently fit and physically trained to participate in any Event which I elect to enter. I have no physical or medical condition which would endanger myself or others if I participate in any Event, or would interfere with my ability to safely participate in any Event. I accept responsibility for the condition and adequacy of my competition equipment and my conduct in connection with any Event.

1. I understand and acknowledge the dangers associated with the consumption of alcohol and/or drugs before, during and after any Event and I recognize that consumption of alcohol and/or drugs might impair my judgment and/or motor skills. I assume full responsibility for any injury, loss or damage associated with my consumption of alcohol and/or drugs.

2. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, and anyone else who might sue on my behalf, I HEREBY WAIVE, RELEASE, and FOREVER DISCHARGE The YWCA of Greater Johnstown, all Event sponsors, Event producers, Event staff, administrators, officials, contractors, vendors, and organizers (including race directors), volunteers, all other persons or entities involved with an Event, states, cities, towns, and other governmental bodies and locations in which an Event or portions of an Event takes place, and the officers, directors, employees, agents, insurers, other participants and representatives of all of the above (collectively, the "Released Parties"), from any and all claims, causes of action, damages, losses (economic and non-economic), and liabilities of every kind (collectively "Claims"), for death, personal injury, or property damage, which may arise out of, result from, or relate to my participation in, or my traveling to or from, any YWCA of Greater Johnstown Event, including but not limited to any Claims for theft, damage to any equipment, negligence, partial or permanent disability, Claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (at an Event site or elsewhere), and any Claims for medical or hospital expenses.

3. I acknowledge and ASSUME ALL OF THE RISKS and aspects of an Event. I acknowledge that walking, running, bicycling, swimming and other portions of an Event are inherently dangerous and I understand that I will be participating in an Event at my own risk, that I am responsible for the risk of participation in an Event, and that I am waiving and releasing my legal rights to sue for any injury or damages arising out of or resulting from my participation in an Event. I further understand that any injury or damages incurred may be the result of negligence, omission or carelessness by the Released Parties.

4. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the Claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY and HOLD HARMLESS the Released Parties from any and all expenses incurred, Claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide by any part of this Waiver Agreement, my breach or failure to abide by any of The YWCA of Greater Johnstown's Competitive Rules, and my actions or inactions which cause injury or damage to any other person.

5. I AGREE to abide by the Competitive Rules adopted by The Greater Johnstown YWCA and the Guide to Prohibited Substances and Prohibited Methods of Doping adopted by the United States Anti-Doping Agency. I AGREE that prior to participating in an Event I will inspect the race course, facilities, equipment, and areas to be used, and if I believe or become aware that any are unsafe, I will immediately advise the Race Director. I FURTHER GRANT to Event organizers, and their licensees the right, permission, and authority to use my name, voice, picture, or photograph, in any broadcast, telecast, commercial advertisement, promotion, or other account of an Event, and I WAIVE any rights to future compensation to which I might otherwise have been entitled for such use.

6. The parent or legal guardian who signs the Waiver Agreement on behalf of a minor, incapacitated and/or mentally challenged person (hereinafter "Said Person"), hereby acknowledges that he or she has the legal capacity and authority to act on behalf of Said Person to legally bind Said Person to the Waiver Agreement. The parent or legal guardian who signs the Waiver Agreement agrees to indemnify and hold harmless the Released Parties for any expenses incurred, Claims made, or liabilities assessed against them, as a result of any insufficiency of legal capacity or authority to act on behalf of Said Person in the execution of the Waiver Agreement.

7. If any provision of this Waiver Agreement shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Waiver Agreement and shall not affect the validity and enforceability of any remaining provisions. (Athlete or Participant)

Print Name: \_\_\_\_\_

Signature: X \_\_\_\_\_

Date: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

(Parent or Legal Guardian for Persons under Eighteen (18) Years of Age or Legal guardian of incapacitated and/or mentally challenged person)

Name of Guardian: \_\_\_\_\_

Signature: X \_\_\_\_\_

Date: \_\_\_\_\_

Relationship to Minor or Legal guardian of incapacitated and/or mentally challenged person:

\_\_\_\_\_