

# Preston City: Festival of Lights Bed Race Entry & Waiver Form

Team Category (*Chose one only*) School \_\_\_\_\_ Business \_\_\_\_\_ Family \_\_\_\_\_ Club: \_\_\_\_\_

Team Name: \_\_\_\_\_ Team Captain & address: \_\_\_\_\_

Ph. # \_\_\_\_\_ Date: \_\_\_\_\_

Team Members: Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

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

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

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

Please complete all of the information on this form and have all team members' sign and date. You can drop off or mail your Entry & fee (\$25) at the following Preston, ID locations:

*Beckstead Real Estate 35 S State St. Attention Kris Beckstead*

*Ireland Bank 85 East Oneida; attention Craig Conklin*

*City of Preston 70 W Oneida; main office*

If you have questions please call:

*Kris Beckstead @ 208-339-0527*

*Craig Conklin @ 208-852-2400*

Thank you for your Entry and GOOD LUCK!!!

WAIVER OF LIABILITY I acknowledge that I have read the rules and guidelines and agree that my team will adhere to all the rules and guidelines and conduct ourselves with sportsmanlike conduct.

THIS WAIVER OF LIABILITY FORM MUST BE SIGNED BY ALL PARTICIPANTS IN THE RACE I acknowledge the physical activity and potential hazard that participation in this bed race may cause. I am medically able to compete in the bed race. I understand that hazards may be present. I am participating in this activity voluntarily and voluntarily assume full responsibility for any risk of loss, property damages or personal injury, including death that may be sustained by me, regardless of my role, including (but not limited to) falls, contact with other participants, spectators, equipment, weather, condition of the road and all such risks being known to me, as a result of participating in the bed race or while traveling to or from, in, on or upon the premises where the bed race is being conducted. I agree to participate and abide by any rules and regulations the Preston City, Festival of Lights event sponsor may impose. In consideration for you permitting me to participate in the Bed Race" on Saturday, November 25, 2017, I hereby for myself, my heirs, executors, administrators or anyone else claiming on my behalf, pledge not to sue, and waive release and discharge the Bed Race members, volunteers, race officials and any sponsoring body and assigns from any and all claims or cause of action I may have for all personal injuries or property damages caused by or as a result of the Preston city Festival of Lights, Bed Race with its related activities. I agree that the City of Preston or the Festival of Lights organization assumes no responsibility or liability.

By signing above, I shall indemnify and hold the City of Preston, Idaho and its officers, agents, volunteers, employees, directors, designees, contractors and assignees, as well as any person or organization officially or unofficially connected with this race, harmless and free from any and all liability and claims, including but not limited to personal injury or any damages or costs or expenses, including court costs and attorneys' fees, whatsoever alleged to have arisen or resulted wholly or partially from my participation in this competition event, whether caused by negligence or otherwise. This indemnification and hold harmless includes, but is not limited to, the payment of all attorney fees, expenses, costs, judgment, and other expenses which may be incurred by the City of Preston, Festival of Lights.

My signature above confirms that I have read and understand the above waiver and content.

## Preston Festival of Lights Bed Race Rules

- \$25.00 entrance fee and registration form must be submitted before race begins.
- Liability waiver must be signed for each participant. Participants ages 12-17 must have the signature of a legal guardian.
- Bed Race Teams: Each team must consist of 6 people (4 runners, 2 riders). Riders on the bed must wear a helmet and nightclothes. Participants must be 12 years of age or older.
- Bed, sheet, nightclothes, and helmet will be provided by Festival of Lights organization.
- Length of course is approximately 600 feet on Main Street between 1st South and Oneida. Starting point will be marked with cones.
- At the starting point, beds must be behind cones. Runners and rider will be 5 yards behind the bed until START is signaled.
- Nightclothes and sheet will be draped over the bed rail.
- At START signal, teams rush to the bed and begin making the bed and dressing the rider. The bed sheet must be spread out over the bed. Rider must have nightclothes and helmet on, with the chinstrap hooked, and be on the bed BEFORE the runners start pushing the bed. Early departure will result in a time penalty.
- All runners must keep up with the bed. Runners lagging behind will result in a time penalty.
- Race to the crosswalk where first runners and first rider will make an exchange with second runners and second rider.
- At MIDWAY point, runners and second rider, change the bed (turn the sheet over and spread it out). First rider may NOT help with dressing the second rider or making of the bed. This is the responsibility of the second runners. Team bed must be behind the crosswalk line. Second rider must have nightclothes and helmet on, with the chinstrap hooked, and be on the bed BEFORE the runners start pushing the bed. Early departure will result in a time penalty.
- Teams interfering with another team's bed, runners or riders will receive a time penalty.
- The teams racing in each heat will first be determined by challenging another team to a race or drawing from a hat. If there are an odd number of teams, one team will race alone for their time. Subsequent races will be chosen using a bracket system. The bed race committee reserves the right to not use bracket system and select winners based on race time only if less than six teams participate in the event.
- Cash prizes will be awarded as follows: \$300.00 for 1st place in each category.
- ALL DECISIONS OF THE JUDGES WILL BE FINAL!