

Saturday, April 3rd 2021 7am—12pm

For more information please call (760) 240-7880 or go to www.AVRecreation.org

Name	Date of Birth	
Address	City	Zip Code
Phone	Alternate Phone	
I, the undersigned, understand the follow	0	
hazards involved and hereby agree to a		and the race is run on public streets that are not closed
	lder whenever possible and take all safety precaut	
		s recreation activities" (CA Government Code 831.7).
	,	agree to hold harmless and release the Town of Apple o my participation in Town of Apple Valley program
	, , ,	or property damage resulting from the active or passive
		on of any property or equipment owned, operated or
maintained by the Town of Apple Valley.	I am responsible for any loss, theft or damage to	either personal or Town equipment, articles or facilities

while using said equipment, articles and/or facilities.

Participant/Parent Signature (if under age 18) _____ Date _____

14955 Dale Evans Parkway Apple Valley, CA 92307

