



Prevention & Education Program



The Blast for Prevention & Recovery

June 21-27, 2020

THIS IS A VIRTUAL EVENT 😊

Please complete one form for each participant (including children/youth)

Name:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Mailing Address:			
DOB:	Email Address:	Phone:	
Optional: Ethnicity		<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Not Hispanic or Latino
Optional: Race: Please Select One or More		<input type="checkbox"/> American Indian or Native Alaskan	<input type="checkbox"/> Asian
<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Pacific Islander	<input type="checkbox"/> White	
Have you participated in this event in prior years? <input type="checkbox"/> Yes <input type="checkbox"/> No			
How did you hear about this event?			

➔ You must be registered by June 10th to guarantee that you will receive your bib, color packet, and medal prior to the race

Choose one

<input type="checkbox"/> Run/Walk - \$25
<input type="checkbox"/> Recovery Scholarship → <input type="checkbox"/> Qualifications Met → Agency:
<input type="checkbox"/> Prepaid/Sponsored → Agency or Organization:

➔ Choose one color for your color packet *as supplies allow; a different color may be substituted

<input type="checkbox"/> Pink – Substance Abuse Prevention
<input type="checkbox"/> Purple – Suicide Prevention
<input type="checkbox"/> Yellow – Recovery
<input type="checkbox"/> Blue – Mental Health Promotion
<input type="checkbox"/> Green – Problem Gambling Prevention

Total Cost	\$
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Make checks payable to: Adapt – The Blast

To pay by debit/credit please call Cati Stremmel at 541-492-0198



Waiver on Other Side



Return this form to:

Adapt • Attn: Cati Stremmel • 548 SE Jackson Street • Roseburg OR 97470 • catis@adaptoregon.org

Please read & sign consent form to indicate your agreement to each of the following:

1. I understand that participating in Color Blasting is a potentially hazardous activity.
2. I agree not to participate unless I am medically and physically able, which I am solely responsible to determine. I assume all risks associated with participating in the fun run/walk and Color Blasting, including, but not limited to, slips, falls, contact with other participants, negligent or wanton acts of other participants, the effects of the weather including high heat, cold temperatures, smoke, storms, and/or humidity. All such risks being known, assumed and appreciated by me.
3. I agree that Adapt is not responsible for any personal items or property that are lost, stolen, stained, or damaged at or during the event.
4. I consent to emergency medical care and transportation in order to obtain treatment in the event of injury to me, as medical professionals may deem appropriate. This assumption and release extends to any liability arising out of, or in any way connected with, the medical treatment, and transportation provided in the event of an emergency.
5. I understand and agree that children under the age of 15 are not permitted to participate or accompany me in the race unless a parent or guardian signs a waiver on their behalf.
6. I grant permission to Adapt to use any photographs, motion pictures, recordings or any other record of this event for any purpose including, but not limited to, promoting, advertising, and marketing purposes. Any and all photographs, motion pictures, recordings or other records of the event are the sole property of Adapt.
7. I understand that all entries are final with no refunds.
8. Adapt reserves the right in any event of emergency or local or national disaster to cancel the race and in the event of cancellation or change there is no refund of entry fees.
9. Participants are expected to exhibit appropriate behavior at all times, including obeying all laws. This includes respect for all people, equipment, and facilities and cooperative, positive participation. Adapt may dismiss, without refund, anyone whose behavior endangers the safety or negatively affects the race, a person, the facility or property of any type or kind.
10. I agree to indemnify Adapt from any and all third-party claims caused in whole or in part by my actions.

Waiver and Release of all claims and assumption of risk

I recognize and acknowledge that there are certain risks of physical injury to participants in the fun run/walk and Color Blasting, and I voluntarily and knowingly agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of said participation. I further agree to waive and relinquish all claims I may have (or which may accrue to me) as a result of participating in these activities against Adapt including employees, volunteers, and sponsors. I agree that I am solely responsible for determining if I am physically fit and or skilled for the race or activities contemplated by this Assumption and Release. It is always advisable, especially if the participant is pregnant or disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. When registering online, my online signature shall substitute for and have the same legal effect as an original form signature. PARTICIPATION WILL BE DENIED, if I have not signed this waiver before the start of the event.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

Name (printed)

Signature (check if electronic)

Only complete below if you are a parent or guardian of a participant under the age of 18

I, the parent or guardian of the above-named participant, have read through this waiver and all its terms, and I hereby give my approval to this child's participation in the fun run/race and Color Blasting. I assume all risks and hazards incidental to child participating in this event. I acknowledge I have read, accepted and agree to the terms on waiver.

Parent or Guardian Name (printed)

Parent/Guardian Signature (check if electronic)