

The 8th Annual **Bonaire
EcoSwim**
Saturday December 6, 2008

PLEASE PRINT CLEARLY OR REGISTER ONLINE

Name _____ Male Female

Address _____

City, State, Zip _____ Country _____

Email address _____

Birth date _____ Age on race day _____

Daytime phone number _____ Evening phone number _____

Events (you may enter only one)

10K Solo 5K Solo 5K with fins 3K Solo 3K with fins 1K Solo 1K with fins

Relay 2K x 2 people Team Name* _____

Teamate Name _____

*If part of a relay each swimmer must complete their own entry form indicating teammates name.

Payment Information (includes t-shirt and cap, U.S. dollars only)

Entry fee recieved prior to November 1, 2008 • \$89 U.S. _____

Entry fee November 1, 2008 and after • \$109 U.S.
entries received after November 1 receive t-shirt and cap based on availability _____

Shirt size Small Medium Large XLarge

Checks payable in US Dollars to: Aqua Moon Adventures **Total Amount Enclosed** _____

Mail to: Aqua Moon Adventures, 2615 NW 99th Avenue, Coral Springs, Florida 33065
All fees are non-refundable. Incomplete entries will not be accepted.

Event Information Posted at: www.AquaMoonAdventures.com

Name (last name/first): _____

2008 Bonaire EcoSwim Entry Form • Waiver/Release of Liability:

Please read carefully before signing. This is a release of liability and waiver of certain legal rights.

I, the enrolled participant and/or the parent/guardian of the participant (if applicable) agree and understand that swimming is a HAZARDOUS activity. I recognize that there are risks inherent in the sport of swimming, including but not limited to, paralyzing injuries and death.

The participant hereby agrees to participate in the swimming event and associated activities and/or programs and hereby agrees to indemnify and hold harmless: Aqua Moon Adventures and/or its sponsors, agents, directors, officers, volunteers, and employees, including the race committee, against any liability resulting from any injury that may occur to the participant while participating in The Bonaire EcoSwim events and associated activities and/or programs. The participant also agrees to indemnify Aqua Moon Adventures and/or its sponsors, agents, directors, officers, volunteers, and employees, including the race committee, for any damages incurred arising from any claims, demand, action or cause of action by the participant.

The participant authorizes any representative of Aqua Moon Adventures and/or its sponsors, agents, directors, officers, volunteers, and employees, including the race committee, to have the participant treated in any medical emergency during their participation in The Bonaire EcoSwim events and programs. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

I also understand that events outside of one's country present many types of additional risks and that the standard of care may not be what I am accustomed to.

I HAVE CAREFULLY READ THE ABOVE LIABILITY RELEASE AND SIGN IT WITH FULL KNOWLEDGE OF ITS CONTENTS AND SIGNIFICANCE.

Signed: _____ Date: _____
(Participant if 18 year of age and over)

Signed: _____ Date: _____
(Parent/guardian if under 18 years of age)

Parent/Guardian's printed name: _____

Authorization and Event Promotion

I, the enrolled participant agree to be filmed, photographed, taped, quoted or otherwise mentioned (without compensation) by the Event Director (also known as Meet Director), or by anyone authorized by the Event Director. This includes but is not limited to the official and authorized photographers, writers, hosts, or sponsors of this event under the conditions authorized by the Event Director. I give the Event Director, and anyone authorized by the Event Director, the right to use (without compensation) my name, picture, likeness, quotes, and biographical information, whether audio or visual, before, during and after the period of my individual or team participation in this event. I will not promote third party sponsors, causes, or charities unless pre approved by the Event Director. I understand that there will be no refunds given for any reason including event cancellation.

Signed: _____ Date: _____
(Participant if 18 year of age of over)

Signed: _____ Date: _____
(Parent/guardian if under 18 years of age)

Parent/Guardian's printed name: _____

On island lodging/contact: _____