



Volunteer/Staff Registration Form

Name: _____

Address: _____

Email: _____

Phone: _____

DOB: _____

T Shirt Size: S _____ M _____ L _____ XL _____

Race(s) you would like to volunteer/staff: _____

Preferred position: _____

Waiver

On _____ (date), during the _____ (event name) , I _____ (name), my heirs, executors and assignees, do hereby waive and release all rights I may have against Trimax Endurance Sports, the organization holding this event, its agents, representatives, sponsors, and volunteers, for any and all claims for injuries or losses that may directly or indirectly result from volunteering, working, or participating in any way in this event. Also, none of the above are responsible of the loss of personal items nor any other aggravation incurred in connection with this event.

Signature of Participant / Parent if under 18

Date

Please return completed form via email:

Email – info@trimaxendurancesports.com