

BED RACE ENTRY FORM

Return completed entry form to:

Volksfest & Art Fair Bed Races

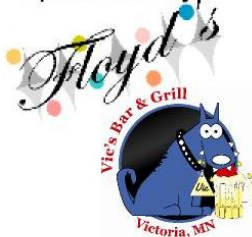
c/o Brian Pulvermacher
 Victoria Fire Department
 P. O. Box 36
 Victoria, MN 55386

Brian.Pulvermacher@genmills.com
 or call 612-868-5681

Remember: first received, first entered! We thank the Bed Race committee, made of up the Victoria Fire Dept. volunteers for making the Bed Races a hugely successful event!



Sponsored by



Name or Group _____

Email _____

1. Secondary Contact Person _____

Phone _____ Phone #2 _____

Email _____

Address _____

City _____ State _____ Zip _____

VICTORIA VOLKSFEST BED RACE WAIVER OF LIABILITY

THIS FORM MUST BE SIGNED BY ALL PARTICIPANTS IN THE EVENT AND RETURNED TO BED RACE OFFICIALS PRIOR TO THE EVENT.

In consideration of the acceptance of my application/entry form for the Victoria Volksfest Bed Races, I hereby release all associated groups: Sponsors Floyd's Bar and Victoria Bar & Grill, the Victoria Business Owners Association, the City of Victoria, and any person officially or unofficially connected with this competition, from all liability for any injuries or damages whatsoever arising from this competition event.

Team Captain #1: _____ Date _____

Team Member #2: _____ Date _____

Team Member #3: _____ Date _____

Team Member #4: _____ Date _____

Team Member #5: _____ Date _____

THIS SIGNED WAIVER MUST BE TURNED IN TO BED RACE OFFICIALS PRIOR TO EVENT.