

JUNE 2, 2007 TOUR des TREES, REDWOOD CITY CHILDREN'S REGISTRATION FORM

PERSONAL DATA

Name: _____ E-Mail Address: _____

Mailing Address _____

City: _____ State/Province: _____ Zip/Code _____

Home Phone: (____) _____ Business Phone: (____) _____ Fax: (____) _____

Condition of Child's Health: _____

Please circle your preferences:

T-Shirt Size: 6 8 10 I want to participate in the travel around the park: Walk Bike Scooter

I want to: Face Paint Art project Mural Bird Feeder

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IN CASE OF EMERGENCY PLEASE CONTACT

Name: _____ Relationship to Applicant: _____

Home Phone: _____ Business Phone: _____

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RELEASE

In signing this release for my child's participation in *Tour des Trees, Redwood City*, sponsored by the City of Redwood City referred to as the "City" hereafter and the Tree Research and Education Endowment Fund, referred to as the "TREE Fund" hereafter, I do hereby release the City and TREE Fund, and all sponsors, as well as their Council, commissions, committees, directors, boards, officers, employees, agents, and successors, and assigns, from any and all claims, present or future, resulting from or arising out of my participation, hereby meaning and intending to include herein all personal injuries, conscious suffering, death, and property damage resulting from or in any way connected with or arising out of this event and anything incidental thereto. I further agree to hold them free and harmless from any costs of defense, settlement, payment of damages, judgments and any other expenses related to injury sustained by me that is in any way related to my participation in this event.

I understand the City and the TREE Fund has advised all participants to seek a qualified physician's opinion concerning their fitness to participate in *Tour des Trees, Redwood City*, and to ensure that they have adequate medical insurance to cover expenses incurred while participating. I also consent to and permit emergency medical treatment in the event of injury or illness sustained as a result of taking part in this event. I realize that my participation in the travel around the park or activities requires my attention to my child for the personal safety of my child and others. Since the chance of head injury is considerably reduced by wearing an ANSI/Snell-approved helmet, I agree to have my child wear an ANSI/Snell approved helmet at all times while riding a bike, scooter or other wheeled apparatus in *Tour des Trees, Redwood City*. I agree, further, that this "Release" shall be interpreted under the laws of the State of California and the State of Illinois, USA.

Signature of Parent/Guardian (if participant is under 18): _____ Date _____

Please accept my tax deductible donation to the TREE Fund in the amount of \$ _____

Check (enclosed). Checks should be made payable to the TREE Fund

Credit Card (AMEX, Visa, or Mastercard) # _____ - _____ - _____ - _____ Exp. __ / __

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**Send registration to: City of Redwood City, care of Public Works Services,
1400 Broadway, Redwood City, CA 94063**