



18th Annual

Surfrider Scholarship Paddle Race
 Saturday, July 23, 2011
 (rain date: July 30)



ENTRY FORM

**KDH Bath House-
 Ocean Bay Blvd Beach Access
 in Kill Devil Hills
 (across from Stop & Shop)
 Race begins at 10:00
 (registration begins at 9am
 and closes at 9:45am)**

Entry Fee:

\$20 non-members

\$15 members

\$15 kids (ages 8-14, 1/2 Mile Paddle)

**(Must be received by July 20th -
 Race Day Entry Add \$5)**

**Join the Surfrider Foundation
 today and get \$5 off entry fee!**

- \$25 Individual Membership
- \$15 for Students
- \$40 Family Membership

Visit www.surfrider.org/outerbanks for more info.

Please mail this form and fee to

P.O. Box 1576, KDH 27948

Check Payable to Surfrider Foundation
 Outer Banks Chapter

CALL (804) 683-3123 for questions or more information on Surfrider's Paddle

Name: _____ Phone #: _____

Address: _____

Email: _____

Emergency Contact Name & Phone #: _____

Gender: Male Female Age: _____

Board Size (in feet/ inches): long/ short board: _____ paddle board: _____ other: _____

T-shirt Size: Adult: S M L XL Youth: S M

Surfrider Foundation Member: Yes No

SELECT A DIVISION					
(UNDER 8 FEET) Short Board <input type="radio"/>	(OVER 8 FEET) Long Board <input type="radio"/> Men <input type="radio"/> Women	SUP <input type="radio"/> Men <input type="radio"/> Women	Kids <input type="radio"/> Boys <input type="radio"/> Girls	Paddle Board <input type="radio"/>	Kayak <input type="radio"/> Boys <input type="radio"/> Girls

Please read below and sign, required for participation in event.

WAIVER: In consideration of your acceptance of this entry, I, the entrant and/or my legal guardian, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I, the entrant and/or my legal guardian, may have against the Town of Kill Devil Hills, Dare County, State of North Carolina, and the Outer Banks Chapter of the Surfrider Foundation, and any other sponsors and organizers of this event, their representatives, successors or assigns for any and all injuries suffered by the entrant, in said event. I, the entrant and/or my legal guardian, attest and verify that the entrant is physically fit and has trained for the completion of this race sufficiently; and follow race rules, guidelines and set race course.

Full Name of Entrant (Printed): _____ Date: ____/____/____

Signature of Entrant: _____

Signature of Parent if entrant under 18: _____