## For your safety...

Each racer must wear a helmet and a class 3-5 life jacket during the race. Every boat must have a sounding device. All participants must sign an ACA release form.



## Whitewater Races Team

## Race Registration Form 2019 UPPER CLACKAMAS WHITEWATER FESTIVAL

| Name (ple                    | ase print)   |                                 |                 |          |         |           |     |                              |
|------------------------------|--|---------------------------------|-----------------|----------|---------|-----------|-----|------------------------------|
| Street Add                   | ress   |                                 |                 |          |         |           |     |                              |
| City                         |  |                                 | State Zip Phone |          |         |           |     |                              |
| Age                          | (if un   | der 18, parent                  | or guard        | tan must | sign re | elease fo | rm) |                              |
| E-mail                       | Boat Type & Color  |                                 |                 |          |         |           |     |                              |
|                              |  | f all applicable  ss payable to | •               |          | orm pe  | er team.  |     |                              |
| Bib #<br>(UCWWF<br>use only) | Sunday May 19"   |                                 |                 |          |         |           |     |                              |
| Team                         | 11:00 \$15/team Andy & Bax R-2 Slalom Race – All Gates Race from Fish Creek to Carter Bridge |                                 |                 |          |         |           |     |                              |
| Bib N<br>Team M              | umb<br>embers  | er team for all <b>er:</b> 3:   | Tea             |          |         |           |     |                              |
| 2)                           |  |                                 |                 |          |         |           |     |                              |
| 3)                           |  |                                 |                 |          |         |           |     | UCWWF USE ONLY               |
|                              |  |                                 |                 |          |         |           |     | Fees Paid                    |
|                              |  |                                 |                 |          |         |           |     | Check#<br>Signed waiver(s):  |
|                              |  |                                 |                 |          |         |           |     | (All team members) ACA Minor |
| 6)                           |  |                                 |                 |          |         |           |     |                              |