



Pub Crawl Bed Race Registration Form

Team Name _____

Captain's Name _____

Mailing Address _____

Cell Phone _____

Email Address _____

Release and Waiver of Liability

I hereby release the sponsors, the Sedalia Lions Club, and any other person officially connected with this competition from all liability for any injury or damages whatsoever arising from my participation in the event.

I hereby give my permission for the Sedalia Lions Club to use my picture and/or videotaped image and/or name in any publicity deemed necessary for the promotion of this event at no compensation.

I hereby acknowledge I have read and understand the Bed Race Rules and Regulations and agree to abide by them.

Captain	_____	_____	____/____/____
	(print name)	(signature)	Date of Birth
Member	_____	_____	____/____/____
	(print name)	(signature)	Date of Birth
Member	_____	_____	____/____/____
	(print name)	(signature)	Date of Birth
Member	_____	_____	____/____/____
	(print name)	(signature)	Date of Birth
Member	_____	_____	____/____/____
	(print name)	(signature)	Date of Birth

Mail Registration and entry fees to:

Sedalia Lions Club
Bed Race Registration
P.O. Box 1085
Sedalia, MO 65302-1085

This form must be signed by all team members in this event. No exceptions!

Make Checks Payable to: Sedalia Lions Club

Entry Fee: \$25

Mail-In Registration Deadline is March 11th, 2023

Please visit our website <https://events.sedaliions.org> for rules and other information

It will be at the discretion of the Sedalia Lions Club Bed Race Committee to deny participation of any team or team member.