



TUG OF WAR

July 5, 2009

Mather Arch Fort Erie

DIVISION	
Children up to 10	_____
Youth 11 – 17	_____
Adults 18 +	_____

GROUP Name: _____

TEAM leader _____ **Phone #:** _____

email: _____

GROUP Members

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

First Name: _____ **Last Name:** _____

I, the undersigned, representing _____ understand and recognize that participation in the above noted activity involves potential risk, We HEREBY UNDERTAKE to act in a responsible and safe manner at all times and hereby agree to indemnify the Fort Erie Festivals from any claims or damages caused as a result of my negligence while participating in the above activity, namely the "TUG OF WAR".

Signature _____ **Date:** _____

Print Name _____

Parent/Guardian Signature _____ (if under 18 years of age)

Please Return to: P.O. Box 1241, Fort Erie, ON L2A 5Y2
Tel: (905) 871-6454 Fax: (905) 871-1266
Email: info@friendshipfestival.com www.friendshipfestival.com

Times and additional information to be sent out June 1, 2009