

BENTWATER LADIES ORGANIZATION

AUTHORIZATION AND RELEASE OF LIABILITY FORM

PASSENGER INFORMATION FORM

(Please provide all the information requested on this form)

First Name _____ Last name _____

Address _____

City _____ State _____ Zip Code _____

E-Mail Address _____

Home Phone _____ Cell Phone _____

I am a BLO member _____ I am a guest _____ (Please provide name of BLO member below)

First Name _____ Last Name _____

Indemnification Statement

Activity: Golden Nugget Casino and Golf Trip Date of Activity: October 23-24, 2019

*Indemnification: I, _____ recognize and voluntarily assume the risks associated with my participation in the **BLO Golden Nugget Casino and Golf Trip** activity and agree to indemnify, hold harmless and release the **Bentwater Ladies Organization**, its officials, agents, employees, assigns, officers and volunteers from and against any and all actions, claims, costs, damages and court costs, including attorneys fees, arising from or in any way associated with or attributed to my participation in the*

***BLO Golden Nugget Casino and Golf Trip** or the use of any **Bentwater Ladies Organization** facility, equipment or motor vehicle which may be used in the furtherance of the aforesaid activity, including malfeasance, misfeasance or nonfeasance.*

*I have carefully read this authorization and release of liability and fully understand its contents. I am aware that this is a release of liability and a contract between the **Bentwater Ladies Organization** and me and I sign it of my own free will.*

Participant Printed Name _____

Signature of Participant _____ **Date** _____

EMERGENCY CONTACT INFORMATION

First Name _____ Last Name _____

Relationship to Participant _____

Day Phone _____ Cell Phone _____

*No one will be able to participate in any **Bentwater Ladies Organization** authorized activity unless this **AUTHORIZATION AND RELEASE OF LIABILITY FORM** is signed and returned to the **Bentwater Ladies Organization**.*