

### MAY 30-31, 2015

7pm - 7am

Buffalo-Niagara Heritage Village 3755 Tonawanda Creek Rd.

**Amherst, NY** 





12 hour continuous relay



Small and Large Team divisions

> for ages 12 & up



### Are You Ready?

Presented by the Amherst Youth Foundation in partnership with Amherst Youth & Recreation

For further info. call

Amherst Youth & Recreation, 716-631-7132

www.amherstyouthandrec.org



# Amherst Relay Challenge

May 30-31, 2015 ■ Buffalo-Niagara Heritage Village (formerly the Amherst Museum) 3755 Tonawanda Creek Rd. ■ Amherst, NY

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### PARTICIPANT RULES AGREEMENT

- 1. I agree to be a member of a team consisting of at least 5 and not more than 10 walkers/runners participating in the Amherst Twelve Hour Dusk To Dawn 2015 Relay Challenge.
- 2. I am at least 12 years old (by Dec. 1, 2015) and understand the physical challenge and time commitment that I am making to my team and the Relay Challenge.
- 3. I will either contribute, or fundraise, at least \$30 per person for the event.

All money contributed/fundraised will be turned in prior to the event. Cash needs to be brought to the Amherst Youth & Recreation office in person. Checks should be made payable to the Amherst Youth Foundation and sent to:

The Relay Challenge, c/o Amherst Youth & Recreation 1615 Amherst Manor Drive, Williamsville, NY 14221 Attn: Mrs. Mobarak-Miller

Proceeds from the event will benefit youth programs and services through the Amherst Youth & Recreation Dept. and the Amherst Youth Foundation.

- 4. My team has a captain who will serve as the team representative. My team also has a coach/chaperone.
  - ☐ If a team is made up of all youth, the coach/chaperone must be an adult, age 21 years or older.

    The Coach/chaperone needs to complete the Medical Information and Waiver & Release forms and turn them into the team captain.
  - □ The captain and/or coach/chaperone must register teams and may turn in completed forms/fees at the Amherst Youth & Recreation, 1615 Amherst Manor Drive, on one of the days listed below.

#### **REGISTRATION DATES - (Turn in completed information, fees, etc.):**

Thursday, May 14 - 5:00p.m. to 9:00p.m. Friday, May 15 - 5:00p.m. to 9:00p.m.

Monday, May 18 – 9:00a.m. to 1:00p.m.

3:00p.m. to 6:00p.m.

With prior notice, special arrangements can be made for those unable to come during the registration period. Call Mrs. Mobarak-Miller at 631-7132, ext. 7523 or send an e-mail to kmobmiller@amherst.ny.us.

- The captain is expected to be present at the Relay Challenge throughout the event.
- Coaches/chaperones are expected to be present at the Relay Challenge throughout the event.
- <u>Coaches/chaperones</u> of each team <u>need to be awake and interacting with team members</u> at the Relay Challenge throughout the event.

Amherst Youth & Recreation ■ 1615 Amherst Manor Drive Amherst, NY 14221 ■ Phone: 716/631-7132 ■ Fax: 716/626-9087

5.	5. I will read the three (3) required forms:			
		Participant Rules Agreement - please keep after reading (White)		
		Medical Information Form (Green)		
		Participant's Waiver & Release Form (Grey)		
	When Lo	amplete the Medical Information and the Mairon C Delega forms I will give them to the contain		

When I complete the Medical Information and the Waiver & Release forms I will give them to the captain of my team, along with my individual fee of \$30 if our team is not sponsored . (see #3)

- 6. On Saturday, May 30, I will arrive at the Buffalo Niagara Heritage Village, 3755 Tonawanda Creek Rd., Amherst, NY, between 5:00-6:30 PM to register and help setup my team's campsite. Opening Ceremonies begin at 6:30 PM. DINNER WILL BE SERVED FROM 7:30-8:30 PM.
- 7. I will bring items that appear on the "What To Bring List" to the Relay Challenge. (The list will be sent to individual team members in May.)
- 8. **I will wear the wristband I receive at registration** throughout the Relay Challenge. The wristband will identify me as a team member eligible for all meals, activities, snacks and access to sites.
- 9. I will stay for the entire Relay Challenge Event. I understand the commitment is for 12 hours and my team and the Relay Challenge planners are depending on me.
- 10. As a participant, I accept the responsibility of following my team's Walking/Running Order:
  - ☐ I understand that each time it is my turn, I am expected to complete my turn by walking the required distance.
  - □ I will carry the team baton and will pass it to my teammate after I have completed my turn.
  - Prior to my actual time, I will be near the starting line stretching, warming up and getting ready to take my turn.
  - □ After my turn, I will report to the scoring table, check in, and do cool down activities.
  - ☐ I understand that as a result of being a dedicated team member, I will complete at least 4 miles during the Relay Challenge. (Some competitive teams have had each member complete 10 miles.)
- 11. I will observe safety rules & sports etiquette during the event.
- 12. I will be appropriate at all times in regards to my language, behavior and clothing.
- 13. I know the following items are prohibited: Tobacco/nicotine products, e-cigarettes. alcohol, other drugs, drug paraphernalia, pets/animals, scooters, skateboards, roller blades, bikes and strollers.

  I will be nicotine, alcohol and other drug-free prior to, and throughout, the Relay Challenge.
- 14. I am aware of the need for separate tenting arrangements for unrelated males and females.

  This arrangement will be enforced by Relay Challenge Officials
  - This arrangement will be enforced by Relay Challenge Officials.
- 15. I am aware that from 10:00 PM Saturday, May 30<sup>th</sup> through 6:00 AM Sunday, May 31<sup>st</sup>, the Relay Challenge site is closed to all non-participants.

It is strongly suggested that all participants be picked up by others who will not be involved with the event after the 7:30 AM Closing Ceremonies. Many team members and coaches stay up all night, or get very little sleep.

The Amherst Youth & Recreation Dept. and the Amherst Youth Foundation reserves the right to interpret, enforce, modify, and/or make exceptions to these rules in order to ensure the safety and well-being of all participants and to protect and preserve the integrity of the Relay Challenge event.

#### Questions or concerns?

Please contact Mrs. Kathy Mobarak-Miller or Mrs. Roseanne McCarthy
Amherst Youth & Recreation, 1615 Amherst Manor Drive, Williamsville, NY 14221
Office phone number: 631-7132; E-mail: kmobiller@amherst.ny.us OR rosemccarthy@amherst.ny.us



Rev. 4/15

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#### **REGISTRATION & MEDICAL INFORMATION**

Please print in ink.		Team Captain: Team Name:							
<u>If under the</u>	e age of 18, this	form is to	be completed	by the par	ticipant and	his/her p	arent/guardian.		
Participant's Name									
How many years have you participated in the Relay Challenge? years									
Date of Birth Ago			ge		(circle one)	Male	Female		
Parent/Guardian Name	(s)								
Adult T-Shirt Sizes	(circle one)	Small	Medium	Large	Xlarge	XXLarg	e		
Address				Tow	n		Zip Code		
Phone Number			E-Mail _						
School Name					Workplac	e			
Primary Physician's Nan	ne			P	hone Numb	er			
Medication(s) either pre				_	n:				
Allergies (Food, medicir	ne, bee stings, l	actose into	olerance, glute	n intolera	nce, peanut a	allergy, e	tc.)		
Please list injuries, disea this event. (If needed, u		-		which migh	nt have a bea	ring on y	our ability to take part i	n	
Emergency Contact Pers	on's Name:								
Relationship to Participa	ant								
Home Phone Number Cell Phone Number Please return this form to your Team Captain. Thank you.									

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### PARTICIPANT'S WAIVER AND RELEASE FORM

I recognize that running or walking in a relay event is a potentially hazardous activity. I realize that I should not enter and participate in such an event unless I am medically able and properly trained. I agree to abide by any decision of an official of the AMHERST DUSK TO DAWN RELAY CHALLENGE relative to my ability to safely complete the relay event. I hereby assume all risks associated with participating in this event including, but not limited to, falls, contact with other participants, the effect of the weather, including rain, high heat and/or humidity, and condition of the track and facilities, with all such risks being known and appreciated by me. I hereby attest that I have no medical problems which would create any risk to myself or others in connection with my preparation for or participation in this relay event. I have read and understand all rules and requirements provided to me with respect to this relay event (including, without limitation, the Participant Rules Agreement), and I agree to comply in all respects with such rules and requirements.

Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself, my guardians, my heirs, executors, administrators, and assigns (collectively, the "RELEASORS"), hereby waive, release, forever discharge, and agree to defend, hold harmless and indemnify the Town of Amherst, the Amherst Youth Foundation, Inc., the Town of Amherst Youth & Recreation Department, Buffalo Niagara Heritage Village (formerly the Amherst Museum), Community Matters and their respective agents, employees, members, directors, volunteers, sponsors, promoters and affiliates (each a "RELEASEE" and collectively, the "RELEASEES"), from and against any and all liabilities, claims, costs and expenses (including, without limitation, reasonable attorneys' fees and disbursements) whatsoever, in any manner arising, directly or indirectly, or growing out of my participation in or preparation for the AMHERST DUSK TO DAWN RELAY CHALLENGE, including, without limitation any of the foregoing arising out of the negligence of any RELEASEES or others. I promise, for myself and on behalf of the RELEASORS, not to sue RELEASEES regarding any claim or cause of action arising out of my participation in or preparation for the AMHERST DUSK TO DAWN RELAY CHALLENGE.

By signing below, I also acknowledge my understanding that while I am participating in the AMHERST DUSK TO DAWN RELAY CHALLENGE, I may be photographed, videotaped or audiotaped. I hereby grant the RELEASEES the exclusive right and permission to tape, broadcast, sell or otherwise use, for any purpose whatsoever, any video or audio tapes, photographs, and any and all other electronic or mechanical reproductions in connection with the AMHERST DUSK TO DAWN RELAY CHALLENGE, of me alone or with other persons, together with all alterations or edited versions of the foregoing.

Every term and provision of this Waiver and Release is intended to be severable. If any term or provision of this Waiver and Release is found to be unenforceable or invalid, it shall not affect the other terms and provisions of this Waiver and Release, which shall remain binding and enforceable.

which shall remain binding and enforceable.							
Date:	Team Name & Team Captain:						
Signature:							
Printed Name of Participant:							

\*\* IF PARTICIPANT IS A MINOR, PLEASE SEE REVERSE SIDE OF THIS FORM \*\*

### CONSENT, WAIVER AND RELEASE OF PARENT OR GUARDIAN

I am the parent or guardian of							
respects for the AMHERST DUSK TO DAWN RELAY CHALLENG	, , , , , , , , , , , , , , , , , , , ,						
HAVE READ AND UNDERSTAND THE FOREGOING WAIVER AND RELEASE. I have reviewed and discussed with my							
child all rules and requirements provided to my child with respect to this relay event (including, without							
limitation, the Participant Rules Agreement) and have informed my child that he/she must fully comply with all							
such rules and requirements. In consideration of allowing my child to participate, I consent to the terms and							
provisions of the Waiver and Release and agree that its term							
· · · · · · · · · · · · · · · · · · ·	and our respective heirs, executors, administrators and assigns. I, for myself, my child and the RELEASORS, hereby						
waive, release, forever discharge, and agree to defend, hold	•						
against any and all liabilities, claims, costs and expenses (including, without limitation, reasonable attorneys' fees							
and disbursements) whatsoever, in any manner arising, directly or indirectly, or growing out of my Child's							
participation in or preparation for the AMHERST DUSK TO DAWN RELAY CHALLENGE, including, without limitation any of the foregoing arising out of the negligence of any RELEASEES or others. I promise, on my behalf and on the							
behalf of my Child and the RELEASORS, not to sue RELEASEES regarding any claim or cause of action arising out of							
my Child's participation in or preparation for the AMHERST I	<i>o</i> ,						
my clinic a participation in or preparation for the 744m2.	OSK TO BYWW NEEKT CHALLETTOE.						
Signature of Parent or Guardian:							
Printed Name of Parent or Guardian:							
Date:							