



Bulldog Athletic Booster Club

BATTLE OF THE BULLDOGS (POWDER PUFF) ALUMNI PARTICIPATION FORM

This form must be completed to participate in “Battle of the Bulldogs” and submitted no later than April 19th 2018. Make checks Payable to Bulldog Athletic Booster Club or make payment online (<https://www.bulldogathleticboosterclub.com>)

Participant Information

Alumni Name: _____

Graduation Year: _____ Adult Shirt Size: _____

Power Puff

Alumni Email Address: _____

Alumni Telephone Number: _____

Emergency Contact Information

Contact Name: _____

Relationships: _____

Telephone Number: _____

Waiver:

In consideration for being allowed to participate in “Battle of the Bulldogs” I release from liability and waive my right to sue The Bulldog Athletic Boost Club, Southeast Raleigh High School, Wake County Public Schools, their employees, officers, volunteers and agents from any and all claims, including claims of negligence, resulting in any physical injury, illness (including death) or economic loss suffered or which may result from his/her participation in this Activity, travel to and from the Activity, or any events incidental to this Activity.

I further certify that I am adequately covered by accident, health and/or hospital insurance policy that is in effect during the event and present school year.

Participant _____ **Date:** _____