

WINTER CORNHOLE CLASSIC

PLEASE PRINT THIS FORM & MAIL/FAX WITH YOUR CHECK PAYABLE TO:

ADRENALINE SPORTS MANAGEMENT

853 N QUENTIN ROAD #248
PALATINE, IL 60067
OFFICE: (847) 829-4538
FAX: (847) 829-4577



For online registration and more information: www.wintercornholeclassic.com

WINTER CORNHOLE CLASSIC, JANUARY 23, 2010

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip _____

Email: _____ Telephone: _____

Birthday: _____ Age on Tournament Day: _____

Sex (circle one): Male Female

Pay by (circle one): Cash Check Credit Card Money Order

Credit Card Type (circle one): VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card Number: _____ - _____ - _____ - _____ Expiration Date: ____/____ 3 Digit Code _____

Registration Amount(s): \$ _____ (See Below) Register Online: www.wintercornholeclassic.com

TO PARTICIPATE:

The Winter Cornhole Classic will begin at 12:00 pm January 23, 2010 at the Pyramid Club located at 236 W Lake St, Addison, IL 60101.

REGISTRATION FEES/SCHEDULE: (Circle Each Division)

Doubles Division: \$50/Team

Singles Division: \$25/Person

- PRIZES: The top three placers in each division will receive an official trophy and \$1350 in payouts according to the following schedule:

	Doubles	Singles
1 st	\$500	\$250
2 nd	\$250	\$125
3 rd	\$150	\$75

**In the event that less than 40 teams register per division, payouts will be based on percentage of revenue*

ATHLETE'S RELEASE: I know that Cornhole is a potentially hazardous activity. I should not enter and participate in this event unless I am medically able and properly trained. I assume all risks associated with this event, including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity; all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application, I, for myself and anyone entitled to act on my behalf, waive and release Adrenaline Sports Management, Arlington Park and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the race even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I also grant my permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

SIGNATURE: _____

Parent's signature required for participants less than 18 years old