



Mitsubishi Cement Corporation Educational Foundation



Ride in the Rocks
Booth Registration Form

October 17, 2009

Event location: Lucerne Valley Middle/High School, 33233 Rabbit Springs Rd., Lucerne Valley, CA 92356

Please fill out both the application and insurance waiver

Enclose check for the full amount and mail to

MCC Educational Foundation 5808 State Highway 18, Lucerne Valley, CA 92356

Deadline October 1, 2009.

Company/Organization Name: \_\_\_\_\_

On-Site Contact Name and Cell phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Product Description: \_\_\_\_\_

IMPORTANT! Food vendors must provide a copy of Health permit and must comply with all County of San Bernardino Department of Health Services rules and regulations, ie fully screened canopy, etc.

Waiver – All vendors must sign the Insurance waiver & Release of Liability before setting up.

10'x10' booth space with 1 table and 2 chairs .....\$100.00

10'x10' canopy pre-set.....\$20.00

Total amount enclosed.....\$\_\_\_\_\_

This is an outdoor event and is subject to cancellation due to weather or other acts of God. Sorry, we cannot give refunds.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Deadline October 1, 2009.

**Mitsubishi Cement Corporation Educational Foundation  
INSURANCE WAIVER & RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way with the Mitsubishi Cement Corporation Educational Foundation (MCCEF) programs, related events, and activities, I and/or the minor participant, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, the undersigned:

1. Agree that prior to participating, I will inspect, or if a parent and/or legal guardian I will instruct the minor participant to inspect, the facilities and equipment to be used, and if I believe, to the best of my ability, that anything is unsafe, I and/or the minor participant will immediately advise Mitsubishi Cement Corporation Educational Foundation of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that I and/or the minor participant, will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result only from my own actions, inactions or negligence of others, the rules of play, or the condition of the premises or any equipment used. Further, that there may be other risks not known to me or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue Mitsubishi Cement Corporation Educational Foundation, MCC Development Corporation, Mitsubishi Cement Corporation, Service Rock Products, its affiliated clubs, their representative administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, their heirs, and if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees", from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.

5.  
**I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE NOT CHANGED IT ORALLY, AND SIGN IT VOLUNTARILY.**  
**X**

\_\_\_\_\_  
**Participant's Name (PLEASE PRINT CLEARLY) Signature & Date  
FOR PARTICIPANTS OF MINORITY AGE**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

**X**  
\_\_\_\_\_  
Parent's Signature & Emergency Phone Name & Date

***MEDIA RELEASE FORM***

Name \_\_\_\_\_ Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

**MEDIA/PHOTO WAIVER:** I hereby authorize and give my full consent to (MCCEF) to copyright and/or publish any and all photographs, videotapes and/or film in which I appear while attending this (MCCEF) event. I further agree that (MCCEF) may transfer, use or cause to be used, these photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, and television programs without limitations or reservations.

**X**  
\_\_\_\_\_  
Signature & Date