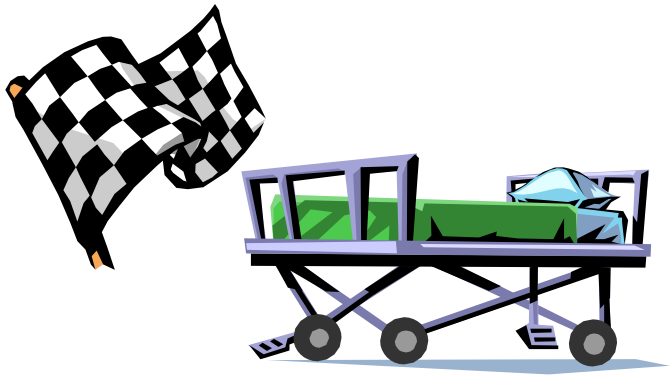
# The 12th Annual Hospital Bed Race

**to benefit community enhancing activities and projects.**
**Saturday, May 14th at 10:00 am in front of Magills**
**7201 Little River Turnpike, Annandale, VA 22003**



## Gather a Team of Five for This Wacky Race

Beds provided for teams to decorate & race – 4 pushers and 1 rider
Awards for best decorations, most enthusiasm & fastest team

**Teams receive:**

- Beverages & Snacks
- Company Recognition and Promotion

Teams raise money through company sponsorship – minimum $500 per team
Make your check payable to the Annandale Chamber of Commerce

**Questions: visit the Annandale Chamber website at www.annandalechamber.com**

This event is organized by the Annandale Chamber of Commerce in cooperation with the Fairfax County Police Department .

# 12th Annual Hospital Bed Race

**Saturday, May 14, 2016 ♦ 7201 Little River Tpk. (Magills parking lot), Annandale 22003**

**Team Registration:**

Team Name: _____ Captain: _____

Address: _____ City, State, Zip: _____

Phone: (  ) _____ E-mail: _____

*(By providing your email address, you are consenting to receiving email communications from the ACC.)*

**Payment Information (Minimum $500 entry fee per Team):**

- We have enclosed a check or money order, payable to: The Annandale Chamber of Commerce
- Please charge my ☐ Visa ☐ MasterCard ☐ American Express; For a total of: $_____

Card Number: _____ Exp. Date: _____

Name on Card: _____

3digit code on back: _____ Signature: _____

Street Address _____ City _____ Zip _____ Phone _____

**Mail Form to:** Annandale Chamber of Commerce, 7263 Maple Place, # 207, Annandale, VA 22003 **or E-mail to:** info@annandalechamber.com **or fax to:** 703-256-7233. **Team check-in & bed decorating begins 8:00 am. Race begins 10 am.**

**Questions? Contact:** Carol Zach Reuss at 703-447-7128 or carolzach@verizon.net (Chamber Organizer)

## All team members must sign the below waiver prior to race:

**ANNANDALE CHAMBER OF COMMERCE, INC., AND THE FAIRFAX COUNTY POLICE** do not provide liability insurance for the protection of persons, organizations, spectators or others who participate in ANNANDALE CHAMBER OF COMMERCE BED RACE.

**LIABILITY DISCLAIMER AND HOLD HARMLESS AGREEMENT**

In consideration of participating in Annandale Chamber of Commerce's Bed Race on the 14th day of May, 2016 I,_____ do hereby release and forever discharge **ANNANDALE CHAMBER OF COMMERCE, INC., AND THE FAIRFAX COUNTY POLICE AND ITS AGENTS, ASSIGNS AND EMPLOYEES** from any and all actions, cause of action, claims and demands for, upon or by reason of any damage, loss or injury, which hereafter may be sustained by me in consequence of participating in the **ANNANDALE BED RACE** on **May 14, 2016.** This release extends to and applies to, covers and includes all unknown, disclosed, unforeseen, unanticipated and unsuspected injuries, damages, losses and liabilities and the consequences thereof, notwithstanding the provisions of any state, federal, local or territorial law or statute to the contrary. Such provisions are hereby expressly waived. It is further understood and agreed that my participation in the **ANNANDALE BED RACE** is not to be construed as an admission or liability or the assumption of any responsibility by **ANNANDALE CHAMBER OF COMMERCE, INC., AND THE FAIRFAX COUNTY POLICE** jointly and separately, and I agree to hold **ANNANDALE CHAMBER OF COMMERCE, INC., AND THE FAIRFAX COUNTY POLICE along with their directors, administrators, officers, agents employees, participants, any sponsor, partner, owner or lessors of premises** harmless from and against any and all actions, claims, demands and liability, loss, damages and expense of whatever kind or nature, including attorney fees, which may at any time be incurred by reason of my participation in the **ANNANDALE BED RACE.**

**Team Member Signatures: (required)**

(1)_____

(3)_____

(4)_____

(5)_____

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Teams receive: Beverages, snacks & company promotion.