



# City of Tolleson 4th of July Celebration

## Parent & Child Water Balloon Toss



July 4, 2017

Veterans Park

8601 W. Van Buren

### Registration Form

Parent First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Child First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ (Child)

**Registration is limited to the first 10 applications received. Pre-registration is recommended.**

**Return to Tolleson Recreation by June 23 or email to [respinoza@tollesonaz.org](mailto:respinoza@tollesonaz.org)**

- ◆ City of Tolleson
- ◆ ATTN: Ruth Espinoza
- ◆ 9555 W. Van Buren
- ◆ Tolleson, AZ 85353

**Prizes:**

**1st Place**

**2nd Place**

**3rd Place**

**2 ages groups:**

**6-12**

**Years of age**

**13—17**

**Years of age**

For more information contact the City of Tolleson Parks & Recreation at 623-474-4992

# Water Balloon Toss Contest Rules

- Must be 6— 17 years of age and 1 adult.
- The object is to toss a balloon as a team without bursting the balloon.
- The team from the furthest throw line wins.
- All Contestants must sign a waiver prior to competing.
  
- In consideration of acceptance into the above referenced City program, I do hereby, for myself, my children, my heirs, executors and assigns, release the City of Tolleson and the officials, officers, agents and employees of the City from liability for any harm, injury, or damage which I or my Immediate family may suffer while participating in the above described program. This includes all risks that are connected with this activity whether foreseen or unforeseen. I agree to hold the City of Tolleson and its agents, officials and employees harmless from any damage to persons or property, resulting from my negligence and/or intentional acts. I assume the responsibility of mental and physical fitness to participate in said program, and agree to abide by all rules and requirements of the program. I am of lawful age and legally competent to sign this Agreement for and on my behalf. I understand the terms and have signed this document as my own free act.

**I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS RELEASE BY READING IT BEFORE I SIGNED IT. I REALIZE THAT BY SIGNING THIS DOCUMENT I AM GIVING UP LEGAL RIGHTS TO WHICH I MAY BE ENTITLED.**

**Signed By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Witnessed by City Staff:** \_\_\_\_\_

**Date:** \_\_\_\_\_