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### CHILL OUT WAIVER FORM



Carpet - Vinyl - Tile - Hardwood - Laminate - LVT/LVP  
Rhinelanders / Minocqua



Children's  
Miracle Network  
Hospitals



<b>DATE</b>
<b>NAME</b>
<b>DATE OF BIRTH</b>
<b>ADDRESS/TOWN/ZIP</b>
<b>PHONE</b>

I, \_\_\_\_\_, have voluntarily elected to participate in the CHILL OUT Fundraiser. I fully understand and accept the risks of jumping in to the waters of Lake Minocqua on **December 30, 2017**. Registration is from 11am to 1pm with the Jump taking place at 1pm. I agree not to hold NRG Media, The Thirsty Whale of Minocqua, Wisconsin, The Children's Miracle Network or any of the sponsors involved liable for any injuries that result from my participation in this event. I hereby confirm that I am in good physical condition and do not suffer from any disabilities or physical conditions that place me at risk or otherwise prohibits my participation in the CHILL OUT on December 30, 2017.

Furthermore, in consideration of my participation in this program, I myself, my heirs and assigns, release NRG Media, The Thirsty Whale of Minocqua, Wisconsin, The Children's Miracle Network (employees, officers, volunteers or sponsors), from any claims, demands and / or causes of action arising in this event. I consent to the use of my name, voice, or likeness without compensation for advertising or publicity purposes. NRG Media, the Thirsty Whale, and the Children's Miracle Network reserve the right to cancel, postpone, or change the Chill Out at any time and for any reason.

I hereby affirm that I fully understand the preceding paragraphs and volunteer to participate at my own risk.

Participant (print name):

Witness (print name):

Signature:

Signature:

**Signature of Parent or Guardian, if under 18 years of age:**

**\*\*You MUST wear something to protect your feet during the jump from the ice and other elements. You will not be able to jump unless you are wearing some kind of protection on your feet.** Registration is from 11am to 1 pm. The jump is at 1pm. Thank you and have fun.

