



Please join us for this jubilee. What better way to celebrate 45 years of clogging than dancing with our friends. **Registration is FREE!** All we ask is that you RSVP, purchase lunch & dinner tickets and event t-shirts before July 22, 2024. T-shirts can be purchased directly from Ink Splash. For RSVP's and meal orders, please complete the form below and return with payment.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell: _____ E-mail: _____

Club/Studio/Team: _____

Please list below the names & emails of all additional dancers and spectators.

Name: _____ email: _____

Name: _____ email: _____

_____	Dancers Registration @ FREE	\$ <u>FREE</u>
_____	Lunch (Pizza, Salad, Soft Drink) @ \$7 (before 7/22/24)	\$ _____
_____	Dinner (Mission BBQ) @ \$20 (before 7/22/24)	\$ _____
_____	Donation	\$ _____
TOTAL ENCLOSED		\$ _____

CCC 45th Anniversary T-shirt can be purchased from InkSplash. Purchased shirts can be picked up at the event or shipped to your home for an additional shipping fee. Order shirts by using this link: <https://store.inksplashmd.com/collections/carroll-county-cloggers>



CCC 45th Anniversary Celebration Registration Form (page 2)

Waiver of Liability

I, in my legal capacity as parent/legal guardian of the minor(s) named on the Carroll County Department of Recreation & Parks Registration Form, or as a participating adult over the age of eighteen (18), recognize and acknowledge that there are certain risks of physical injury, property damages and expenses which my child(ren) or I may sustain as a result of participating in this Program. I further agree on behalf of the minor(s) named on the Carroll County Department of Recreation & Parks Registration Form or myself, heirs, representatives, executors, administrators and assigns to assume all risk and agree to fully release, discharge, indemnify, hold harmless and defend Carroll County Government and its employees, volunteers, agents, and servants from any and all claims for personal injury, property damage, death or accident of any kind arising out of or in any way related to the participation in the Program, however the injury or damage occurs.

Authorization for Use of Photographic Likeness

I agree to allow the Carroll County Department of Recreation & Parks to take and utilize photographic images of the registered individual(s) for the purpose of promoting and publicizing of the Department's programs and/or events. If I prefer to not allow the above registered participant(s) to be photographed, I will call 410-386-2103 to register my request.

Printed Name: _____

Date: _____

Signature: _____

(If under 18, signature of parent or guardian is required)

Printed Name: _____

Date: _____

Signature: _____

(If under 18, signature of parent or guardian is required)

Printed Name: _____

Date: _____

Signature: _____

(If under 18, signature of parent or guardian is required)

Please complete page 1 and 2 of this registration form including the waiver of liability and authorization for use of photographic likeness for **each** dancer and spectator registered. Mail completed form (pages 1 & 2) with payment in full (checks payable to Carroll County Cloggers) to:

**Lynn Grassi
7346 Ash Brook Court
Sykesville, MD 21784**



The Americans with Disabilities Act applies to the Carroll County Government and its programs, services, activities, and facilities. Anyone requiring an auxiliary aid or service for effective communication or who has a complaint should contact The Department of Citizen Services, 410.386.3600 or 1.888.302.8978 or MD Relay 7-1-1/1.800.735.2258, or email ada@carrollcountymd.gov as soon as possible but no later than 72 hours before the scheduled event.

