



19th Annual Downhill Race

A race against drugs and alcohol.

The Branchburg Recreation Department will be sponsoring the 19th Annual Downhill Race on **Sunday, June 7th** (rain date—**Sunday, June 14th**).

For those of you who are new to downhill racing, it's an event held yearly for Branchburg children ages 6 to 14 years old. Families build their own gravity-powered soap box car and race it down the hill on Baird Road against other Branchburg children. We have plans and specifications to help you and your child build your racer. We also have a few cars that can be "borrowed" on a first-come, first-serve basis.

The theme of the Downhill Race is drug awareness. Each car entering the race must have an original anti-drug/alcohol awareness slogan attached to the race car. The top three slogans selected by the judges will win prizes.

This race does not promote losing, so we only have winners! Every racer goes home with a trophy, race shirt and other give-a-ways.

Racers and spectators enjoy a picnic, continuous DJ music and entertainment in a fun-filled family atmosphere. Call the Recreation Office for more information.
908-526-1300 X187

- AGES:** 6 to 14 years old
- DATE:** Sunday, June 7th
(rain date Saturday, June 7th)
- TIME:** Racing begins at 12:00 Noon
- PLACE:** Baird Road
- FEE:** \$30 per driver
(Maximum of 3 drivers per car)

Registration Deadline is May 8, 2015



2015 DOWNHILL RACE REGISTRATION FORM

****Entire registration form must be completed and signed****

****Complete separate registration forms for each participant****

FAMILY INFORMATION

RESPONSIBLE PARENT/GUARDIAN (RPG) or ADULT PARTICIPANT

FULL NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____ WORK PHONE: _____

BIRTHDATE: _____ GENDER: _____

EMAIL: _____

PARTICIPANT INFORMATION (please complete even if same adult participant as above)

FULL NAME: _____

BIRTHDATE: _____ GENDER: _____ GRADE: _____ SHIRT SIZE: _____

RELATION TO RPG ABOVE: _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE: _____

EMERGENCY CONTACT RELATIONSHIP: _____

SPECIAL MEDICAL CONSIDERATIONS: _____

By checking this box, I am indicating that my child has individual needs due to a disability. I need to be contacted regarding reasonable accommodations as per the ADA for my child and will be notified regarding special considerations for my child. Note: The Branchburg Recreation Department will need this form (3) weeks prior to the deadline date.

PROGRAM INFORMATION

PROGRAM NAME: 2015 DOWNHILL RACE

PROGRAM CODE: DR-1

Please remember.....only 3 racers per race car!

If your child/children are sharing a car with other racers, please list the other racer's names:

Parents interested in additional shirts, please circle sizes: AM, AL, AXL, AXXL Shirts are \$12 each.

Registrations must be returned by: May 8, 2015.

Mail: 1077 Highway 202N, Branchburg, NJ 08876 Checks: Branchburg Recreation Department.

WAIVER FOR PARTICIPANT AND/BY PARENT

In consideration of your accepting my or my child's entry, I hereby, for myself, my child, our heirs, executors, and administrators, waive and release any and all rights and claims for damages I or my child may have against the Township of Branchburg, Branchburg Recreation Department and its representatives, officers, employees, agents, successors and assigns for any and all injuries suffered by myself or my child on any activity sponsored by these groups. I do hereby grant and give these groups the right to use my or my child's photograph or image with or without my or my child's name both single and in conjunction with other persons or objects for any and all purposes including, but not limited to private or public presentations, advertising, publicity and promotion relating thereto. I warrant that I have the right to authorize the foregoing uses and do hereby agree to hold the Township of Branchburg harmless of and from any and all liability of whatever nature, which may arise out of result from such uses. For the consideration stated above, I further agree that in the event that my child repudiates or attempts to repudiate such release, I will personally indemnify and save harmless the Township of Branchburg, its successors and assigns, for any and all loss and damage occasioned thereby.

Parent's Signatures: Signature(s) below represent(s) that he/she/they is/are parent(s) and has/have legal guardianship of the above mentioned child. If only one signature, he/she also represents that he/she is authorized to sign on behalf of the other parent.

PARENT SIGNATURE (IF UNDER 18 YEARS OF AGE)

DATE

PARENT SIGNATURE (IF UNDER 18 YEARS OF AGE)

DATE

The Branchburg Recreation Department now features
ONLINE PROGRAM REGISTRATION

To use this new feature simply log on to <https://register.communitypass.net/Branchburg>. Create your family account and enjoy quick, convenient and secure program registration via credit card.

If you prefer, you may still register via mail or at the Recreation Department office.
Checks should be made out to Branchburg Recreation.