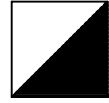




FINGER LAKES ROGAINE



SATURDAY-SUNDAY, JULY 7-8, 2007
(CNYO's SEVENTEENTH ANNUAL ROGAINE)

6 hour, 12 hour and 24 hour events

all starting Saturday at noon

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Team Name: _____ Event (6/12/24 hr) _____

	names	phone	e-mail address
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____

For additional group members attach a separate page. Generally it is recommended that groups with more than three members break into two teams.

team member	gender	age on 7/7/07	basic fee \$35	late fee \$10/\$20	T-shirt \$15 size	(S,M,L,XL)
1	_____	_____	_____	_____	_____	
2	_____	_____	_____	_____	_____	Total \$
3	_____	_____	_____	_____	_____	_____

Maps from 1999 Rogaine available for \$5 each. No. of maps requested _____

Mail with payment to Eric Smith, 275 Main St. Ext., Freeville, NY 13068. Checks payable to Central New York Orienteering. Remember to sign the waiver below.

WAIVER OF RESPONSIBILITY

IT YOU DO NOT FULLY ACCEPT THE FOLLOWING CONDITIONS AND DO NOT SIGN THIS WAIVER, YOU WILL NOT BE PERMITTED TO PARTICIPATE IN THIS EVENT.

I the undersigned, know that Orienteering, as an outdoor action sport, carries significant risk of personal injury. I know that there are natural and man-made hazards, environmental conditions, and risks which, in combination with my actions, can cause me serious, or possibly even fatal, injury. I agree that I, as a participant, must take an active role in understanding and accepting these risks, conditions, and hazards. I also agree that I, and not the organizers and officials of this event, the US Orienteering Federation, Central New York Orienteering, the land owners or managers, or any sponsors, am responsible for my safety while I participate in this event.

Name 1(please print) _____ Signature _____

Name 2(please print) _____ Signature _____

Name 3(please print) _____ Signature _____

Parent or guardian must sign if entrant is under 18 _____ Date _____