



October 21 & October 22, 2017

Autumn Fest Contest Entry Form (Adults 18 & Older)

Check off all contest that apply. Bring entry form to show.

SATURDAY CONTESTS (October 22):

- Games Fest
(Ages 18 & Older)
Time: 1:00pm

- Bubble Ball
(All Ages)
Time: 1:00 pm

- Pumpkin Pie Eating Contest
(Age 18 & Older)
Time: 7:00 pm

- Bagel Eating Contest
(Age 18 & Older)
Time: 7:30 pm

SUNDAY CONTESTS (October 23):

- Bubble Ball
(All Ages)
Time: 1:00 pm

- Pumpkin Pie Eating Contest (8")
(Age 18 & Older)
Time: 5:15 pm

Waiver of Liability / Permission / Medical Release Form

This form is necessary for any contestant of the Autumn Fest Contest listed above. Please complete the entire form. You will not be allowed to participate without this form being signed. I hereby release, indemnify and hold harmless Always Positive Group and the Total Turf Experience employees, sponsors, vendors, agents and assigns from any and all liability, damage claim of any nature whatsoever arising out of or in any way related to my participating in this contest.

Participating in any activity is an acceptance of some risk or injury. I agree that my safety is primarily my dependent upon my taking proper care of myself. I assume all risks related to the activities. In case of an emergency. I do hereby authorize a representative of Always Positive Group and the Total Turf Experience to consent to any medical treatment or care deemed advisable.

I have read and agree to comply with the rules and regulations of the Autumn Fest and Total Turf Experience Autumn Fest contest. My signature below indicates that I have read, understood and freely sign this agreement. I expressly agree that this agreement shall be construed and enforced in accordance with New Jersey laws and I consent to the jurisdiction of said state. I agree that this waiver and release is intended to be as broad and inclusive as permitted under New Jersey State laws so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

PARTICIPANT'S NAME: _____ AGE: _____

RESIDENT CITY/STATE: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

SIGNATURE: _____ DATE: _____

www.alwayspositivegroup.com
(856) 401 - 9111

By submitting this form, I authorize the Always Positive Group to contact me with information about its products and services via postal mail, email, phone and/or text at the contact information provided above. Always Positive Group will never sell or rent your information. You can always remove your information from our list at any time.

Autumn Fest Schedule and Floor Plan Is Subject to Change Without Notice