



**REGISTRATION FORM
SOUTH MOUNTAIN BATTLEFIELD ROAD MARCH
SATURDAY, SEPTEMBER 12, 2009**

Instructions:

Download and print this page. Please complete separate registration forms for each participant. Each participant must also sign a **Liability Release and Indemnity Agreement**. We will be representing the 30th Ohio Volunteer Infantry Regiment for this march. **Registration will close once 70 participants have registered.**

Name _____

Street Address _____

City, State, Zip Code _____

Phone _____ **e-mail address** _____

Unit _____

Battalion Affiliation _____

Rank _____

Union enlisted impressions for this march are highly encouraged.

In lieu of a registration fee, we are collecting tax-deductible donations for the **Civil War Preservation Trust**, with a suggested donation of \$10.00 per person.

Make check payable to: **Civil War Preservation Trust**
In the check memo field, write: **CPMV Event 9/12/09**

Mail the completed registration form and liability release form together with your donation check made out to the Civil War Preservation Trust to:

**CPMV
P.O. Box 922
Middletown, MD 21769-0922**

See the CPMV website **www.cpmv.org** for a go/no go decision in case of severe weather.

Citizens for the Preservation of Middletown Valley



LIABILITY RELEASE AND INDEMNITY AGREEMENT

I, _____ (print name), for myself, my heirs, executors, administrators and assigns, in consideration of the acceptance of my voluntary enlistment as a Citizens for the Preservation of Middletown Valley Volunteer (hereafter known as CPMV), do hereby **RELEASE and HOLD HARMLESS** the Citizens for the Preservation of Middletown Valley, the Town of Middletown, Maryland, Frederick County, Maryland, and all other participants, agents, employees, volunteers, officers, directors, members, property owners, licensees, or assigns of the aforementioned organizations (collectively the "Release Parties") for any injury, death, property damage, or financial loss of any kind received or suffered by me due to participation with CPMV, regardless of whether such injury, death, damage, or loss arises from the negligence of any Released Party or otherwise. I also agree to **INDEMNIFY and HOLD HARMLESS** all the Released Parties of any injury, death, property damage or financial loss of any kind caused by me through my participation as a CPMV Volunteer.

I understand that reenacting and living history may be considered hazardous activities and I am aware of and assume ALL POTENTIAL RISKS associated with such activities. I understand the CPMV and their officers, directors, employees, consultants, subcontractors and assigns make no warranty, expressed or implied, as to the condition, safety or use of any equipment, materials, or other property used or supplied by any of the Released Parties.

I, the undersigned (or legal representative) have carefully read and understand this agreement and all its items. I understand this is a **RELEASE OF LIABILITY** which will legally prevent me or any other person on my behalf from filing or making any other legal claim against any of the Released Parties for the damages in the event of my death or any injury to me or my property.

I expressly agree that the foregoing **Liability Release and Indemnity Agreement** is intended to be as broad and inclusive as is permitted by Maryland law. In the event any clause, term or provision of this document shall be declared or adjudicated void or invalid, it shall in no manner affect the other clauses, terms and provisions hereof, which shall remain in full force and effect, as if the clause, term or provision so declared or adjudicated invalid were not originally a part thereof.

I enter into this agreement freely and voluntarily, and stipulate that this release and indemnity agreement shall be binding upon my successors and assigns.

Signature: _____ **Date:** _____

If Under 18: Parent or Guardian Name (Print): _____

Signature of Parent or Guardian: _____

Date: _____

Witness: _____