

# 2016 HARDY LAKE SWEEP

Saturday, April 30, 2016 from 8:00 am until 1:00 pm

Due to SWCD by April 4, 2016

(Your leader's due date: \_\_\_\_\_)

Before April 4

## Agreement to Participate – Release & Indemnification Form

I, the undersigned, for the duration of the event, agree to follow these instructions:

- Always wear gloves, protective clothing and life jackets when on the water.
- Wear bright orange or fluorescent clothing.
- Be careful when handling broken glass, sharp objects, aerosol cans, etc.
- Do not disturb any drum containers – report their location to the coordinators.
- Watch for snakes, wasps, hornets and poison ivy in debris piles or vegetated areas.
- Use common sense about lifting heavy objects.
- Never work alone.
- Immediately report any accidents or injuries to the coordinators.
- Ask permission if entering private property identify self as a Lake Sweep volunteer.

I also understand that the nature of this activity involves certain dangers and risks, and I voluntarily assume all risks of accident or injury. I hereby release and forever discharge the Event Sponsors, Scott and Jefferson County SWCDs, Hardy Lake, the Indiana Department of Natural Resources, and the Natural Resources Conservation Service and their respective employees, officers, agents, coordinators, and volunteers ("the Sponsors") from any and all liability for personal injury or property damage of any kind sustained in any manner arising from my participation in the Hardy Lake Sweep. I agree to indemnify and hold harmless the Sponsors from any and all claims, loss and expense, including but not limited to damages, legal expenses and costs of defense, in any manner arising from my participation in the Hardy Lake Sweep.

Group Name:		I would like to receive:
Participant Name:		<input type="checkbox"/> Bandana <input type="checkbox"/> Embroidered Patch <input type="checkbox"/> Both
Participant Name:		<input type="checkbox"/> Bandana <input type="checkbox"/> Embroidered Patch <input type="checkbox"/> Both
Participant Name:		<input type="checkbox"/> Bandana <input type="checkbox"/> Embroidered Patch <input type="checkbox"/> Both
Participant Name:		<input type="checkbox"/> Bandana <input type="checkbox"/> Embroidered Patch <input type="checkbox"/> Both
Participant Name:		<input type="checkbox"/> Bandana <input type="checkbox"/> Embroidered Patch <input type="checkbox"/> Both
Contact Information: Fill all blanks		
Address		
City, State, Zip		
Telephone		

\_\_\_\_\_  
Signature of participant or **parent/guardian if participant is under 18**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of participant or **parent/guardian if participant is under 18**

\_\_\_\_\_  
Date

# Group Roster

I will NOT need a campsite: \_\_\_\_\_  
 I will need a campsite:  
 on Fri. \_\_\_\_\_ or on Sat. \_\_\_\_\_  
 # of Tents @ campsite \_\_\_\_\_  
 # of Units with Electricity \_\_\_\_\_

Group Name: _____
Leader: _____ Email: _____
Address: _____ _____
Home Phone: _____ Cell Phone: _____

	Name			Name	
1		___ Bandana ___ Patch ___ Both	16		___ Bandana ___ Patch ___ Both
2		___ Bandana ___ Patch ___ Both	17		___ Bandana ___ Patch ___ Both
3		___ Bandana ___ Patch ___ Both	18		___ Bandana ___ Patch ___ Both
4		___ Bandana ___ Patch ___ Both	19		___ Bandana ___ Patch ___ Both
5		___ Bandana ___ Patch ___ Both	20		___ Bandana ___ Patch ___ Both
6		___ Bandana ___ Patch ___ Both	21		___ Bandana ___ Patch ___ Both
7		___ Bandana ___ Patch ___ Both	22		___ Bandana ___ Patch ___ Both
8		___ Bandana ___ Patch ___ Both	23		___ Bandana ___ Patch ___ Both
9		___ Bandana ___ Patch ___ Both	24		___ Bandana ___ Patch ___ Both
10		___ Bandana ___ Patch ___ Both	25		___ Bandana ___ Patch ___ Both
11		___ Bandana ___ Patch ___ Both	26		___ Bandana ___ Patch ___ Both
12		___ Bandana ___ Patch ___ Both	27		___ Bandana ___ Patch ___ Both
13		___ Bandana ___ Patch ___ Both	28		___ Bandana ___ Patch ___ Both
14		___ Bandana ___ Patch ___ Both	29		___ Bandana ___ Patch ___ Both
15		___ Bandana ___ Patch ___ Both	30		___ Bandana ___ Patch ___ Both

Additional rosters and registration forms may be copied. Mail forms or drop off at USDA Service Center located at 656 South Boatman Road in Scottsburg. We understand that sometimes these registration numbers may change. **Please confirm your participation numbers 3 weeks before the event**, then call 812-752-2269, ext. 3 or email [scswcd@scottcountyswcd.org](mailto:scswcd@scottcountyswcd.org) no later than **April 15<sup>th</sup>**.