



POTOMAC BOARD RATS

TEAM RIDER APPLICATION

TEAM RIDER INFORMATION				
FIRST NAME:		LAST NAME:		*NICKNAME:
ADDRESS:			CITY:	STATE: ZIP:
PHONE:	DATE OF BIRTH:	EMAIL ADDRESS:		
REFERRED BY:				
*Each Team Rider will receive a profile (picture and Team Rider facts) on www.PotomacBoardRats.org . Kid Team Riders will be listed with their nicknames <u>ONLY</u> . Real names will not be used. **Profile will not be posted until picture (jpeg or pdf) is received.**				
TEAM RIDER BIO FACTS				
FAVORITE SPORTS: <input type="checkbox"/> SNOWBOARDING <input type="checkbox"/> SURFING <input type="checkbox"/> SKATEBOARDING <input type="checkbox"/> KITEBOARDING <input type="checkbox"/> SKIMBOARDING <input type="checkbox"/> SKIING <input type="checkbox"/> STAND UP PADDLE BOARDING <input type="checkbox"/> OTHER:				
FAVORITE MOUNTAIN:			FAVORITE SURF SPOT:	
FAVORITE SKATE PARK:			FAVORITE TRICK:	
FAVORITE FOOD:			FAVORITE BAND:	
QUOTE:				
COMPETITION RESULTS: (Don't worry if you don't have any):				
EMERGENCY CONTACT				
FIRST NAME:		LAST NAME:		RELATION:
ADDRESS:			CITY:	STATE: ZIP:
HOME PHONE:		WORK PHONE:		CELL PHONE:
MEMBERSHIP FEE				
INITIATION FEE: \$25	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <small>Made out to Potomac Board Rats</small>			SHIRT SIZE:
Each Team Rider will receive the following: <ul style="list-style-type: none"> • Super cool PBR shirt with our gnarly logo • Team Rider certificate • Lanyard (for your keys, lift ticket, whatever) • Bunch of stickers Please send your application to: PBR, Attn. Wayne Cohen, 1821 Jefferson Place, NW, 4 th Floor, Washington, DC 20036				
QUESTIONS/COMMENTS				
Please contact Greg "Suggs" Miller at (301) 442-6864 or Wayne "Cobra" Cohen at wrc@cohenandcohen.net with questions.				
LIABILITY WAIVER				
As the parent (or legal guardian) of the above named minor, I have verified that the information on this form is correct and I grant permission for this minor to participate in all of the activities of the Potomac Board Rats organization. I assume all risks and hazards incidental to such participation, including risk of serious injury, and do hereby release and waive all claims against Potomac Board Rats, its founders, team riders, and other participants. I further grant permission for emergency first aid to be given to my child in case of injury. I certify that the above information is correct.				
SIGNATURE OF PARENT OR GUARDIAN:				DATE: