



2012 Annual DFW Dragon Boat, Kite and Lantern Festival

Sunday, May 20th, 2012

8:30 a.m. – 6:00 p.m.

Lake Carolyn, Irving, Texas

2012 Team Registration

Team Name: _____ Organization: _____

The Waiver Form must be signed by the Team Captain and submitted at the time of registration.

Team Captain: _____ Email: _____

Phone: (H): _____ (Cell): _____

Mailing Address: _____

City State Zip

1. Team Category (please check one):

- ☐ Mixed Team – includes at least 8 paddlers of each gender (does not include steersperson or drummer in gender count).
☐ Women's Team
☐ Men's Team

2. Challenge Cups (A team may enter only one Challenge Cup)

- ☐ Community
☐ Corporate
☐ Inter-city
☐ Men's Premier
☐ Women's Premier
☐ Cancer Awareness
☐ Youth
☐ Junior
☐ Open

Registration Fee: Corporate Sponsorship Level: \$ _____

Community: \$800.00 before April 15, 2012; \$850.00 after April 15, 2012

Registration Deadline: April 26, 2012

PAYMENT:

Check/money orders are payable to: MPW Foundation

Send to: Marco Polo World Foundation, P.O. Box 631451, Irving, Texas, 75063

Email: team@dfwdragonboatfestival.com

The DFW Dragon Boating Festival Committee reserves the right to refuse team entries.

We (the participating team) understand that final team qualification is subjected to the approval of the DFW Dragon Boat Festival Committee, and that the Festival Committee reserves the right to make necessary changes to the race categories to accommodate the event. We also understand that no outside food (including but not limited to BBQ, picnic, tailgate party, etc.) is allowed due to conflicting interest with event vendors and potential safety hazard.

SIGNATURE OF TEAM CAPTAIN: _____ DATE: _____

Marco Polo World Foundation, P.O. Box 631451, Irving, Texas 75063 www.dfwdragonboatfestival.com



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Team Name: _____

3. Dragon Boat Team Members

Name	Email	Signed Waiver Checklist
1. _____	_____	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>
5. _____	_____	<input type="checkbox"/>
6. _____	_____	<input type="checkbox"/>
7. _____	_____	<input type="checkbox"/>
8. _____	_____	<input type="checkbox"/>
9. _____	_____	<input type="checkbox"/>
10. _____	_____	<input type="checkbox"/>
11. _____	_____	<input type="checkbox"/>
12. _____	_____	<input type="checkbox"/>
13. _____	_____	<input type="checkbox"/>
14. _____	_____	<input type="checkbox"/>
15. _____	_____	<input type="checkbox"/>
16. _____	_____	<input type="checkbox"/>
17. _____	_____	<input type="checkbox"/>
18. _____	_____	<input type="checkbox"/>
19. _____	_____	<input type="checkbox"/>
20. _____	_____	<input type="checkbox"/>
21. _____	_____	<input type="checkbox"/>
22. _____	_____	<input type="checkbox"/>
23. _____	_____	<input type="checkbox"/>
24. _____	_____	<input type="checkbox"/>