

**New safety rule for under 16 year-olds.**

We encourage younger, less-experienced paddlers to participate in the Marathon and enjoy a safe and responsible river adventure. To achieve that goal the Des Plaines River Association requires that paddlers under the age of 16 be monitored (shadowed) throughout the entire Marathon or Minithon by a competent paddler age 18 or older in the same boat or an accompanying (partner) boat. The 18+ paddler must be able to provide needed assistance or be able to arrange for alternate transportation via the radio crew at the any bridge crossing. Any participant under the age of 10 must be accompanied by a competent paddler, 18 or older, in the same boat. Of course, Adult-Youth Class registrants will automatically fulfill this requirement.

**RACE HOTLINE**  
**847-604-2445**  
 FOR MORE DETAILS,  
**CANOEMARATHON.COM**

# Des Plaines River Canoe+Kayak Marathon



## Mail-in Registration Form

You will be printing TWO pages: this page, the registration form and the 2nd page, the waiver.

Mail completed entry form and signed waiver, along with check or money order payable to:

**Des Plaines River Association, 9 E. Peiffer, Lemont, IL 60439**

You **must** fill out a 2nd registration form and waiver if you have more than 2 people per boat. Payment is required for each person in the boat. Submit a separate entry form for each boat.

**PADDLER # 1** (Person who receives packet with boat number)

NAME \_\_\_\_\_ AGE (on race day) \_\_\_\_\_ M / F  
 SEX \_\_\_\_\_

STREET ADDRESS (include St, Ln, Ave, Ct, etc.) \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP (include last 4 digits) \_\_\_\_\_ PHONE (include area code) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**PADDLER # 2**

NAME \_\_\_\_\_ AGE (on race day) \_\_\_\_\_ M / F  
 SEX \_\_\_\_\_

STREET ADDRESS (include St, Ln, Ave, Ct, etc.) \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP (include last 4 digits) \_\_\_\_\_ PHONE (include area code) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**CHECK YOUR CORRECT CLASS**

Entries that fail to designate a class will be placed in "No Contest." If you need assistance with class selection, call the hot line (847) 604-2445.

- 1. MINITHON – 5.25 miles JUNIOR CLASS
- 2. C2 Junior Men, Women/Mixed ADULT/YOUTH CLASS
- 3. C2 Adult/Youth Aluminum/Touring WOMEN CANOE CLASS
- 4. C2 Women Aluminum/Touring
- 5. C2 Men Aluminum MEN CANOE CLASSES
- 6. C2 Men Touring
- 7. C2 Men Competition

- MIXED CANOE CLASSES
- 8. C2 Mixed, Aluminum
- 9. C2 Mixed, Touring
- 10. C2 Women/Mixed, Competition
- ADDITIONAL CANOE CLASSES
- 11. C2 Masters (over 40) Aluminum/Touring
- 12. C2 Masters (over 40) Competition
- 13. C1 Single Paddler (racing canoe recognized by USCA)
- KAYAK CLASSES
- 14. K1 Man Recreational Kayak
- 15. K1 Woman Recreational Kayak
- 16. K1 Man Sea Kayak
- 17. K1 Woman Sea Kayak

- 18. K1 Unlimited Kayak
- 19. K2 Unlimited Kayak
- STAND UP PADDLEBOARD CLASS
- 20. SUP Stand Up Paddleboard
- OPEN CLASSES
- 21. Open Racing
- 22. No Contest



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**FOREST PRESERVE FOUNDATION**

The Forest Preserve Foundation raises funds supporting meaningful experiences in the Forest Preserves of Cook County, especially for youth who rarely have the chance to safely play and learn outdoors. The funds donated by the DPRMarathon will go to youth paddling programs.

**REGISTRANT PAYMENT** **TOTALS**

Payment is \$25 per paddler (3/1 thru 4/22)	Qty _____	\$ _____
Payment is \$30 per paddler (4/23 thru 5/11)	Qty _____	\$ _____
Payment is \$35 per paddler (on race day)	Qty _____	\$ _____
Passengers are \$5 each	Qty _____	\$ _____
T-Shirts: Sizes S ___ M ___ L ___ XL ___ XXL ___ XXXL ___ (Add \$7 each with registration completed before May 11th )	Qty _____	\$ _____
Optional \$5 or more contribution to The Forest Preserve Foundation		\$ _____
<b>TOTAL ENCLOSED:</b>		<b>\$ _____</b>

Des Plaines River Marathon Waiver  
**Amateur Athletic Waiver and Release of Liability**  
READ BEFORE SIGNING

**Name of Event: Des Plaines River Canoe & Kayak Marathon**  
**Coverage Date: May 19, 2019**

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: the risk of injury from the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and, I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the PADDLESPORT RISK MANAGEMENT, DES PLAINES RIVER ASSOCIATION, LAKE COUNTY RADIO AMATEUR CIVIL EMERGENCY SERVICE, LAKE COUNTY FOREST PRESERVES, LIBERTYVILLE TOWNSHIP AND HIGHWAY DEP., LIBERTYVILLE BOAT CLUB, FOREST PRESERVES OF COOK COUNTY, RACE WORKS TIMING, VILLAGE OF LINCOLNSHIRE, ILLINOIS PADDLING COUNCIL, their officers & directors, officials, agents, and/or employees, other participants, sponsors, advertisers, coaches, steerers, and if applicable, owners and lessors of premises used to conduct this event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I also acknowledge that photographs and video may be taken of me in my participation in and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of this race, and/or promotion of this event, its location, other sporting events, sports in general, and/or related purposes. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant/Member Name: PLEASE PRINT \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR PARTICIPANTS OF MINORITY AGE (UNDER 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/legal guardian with responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasees, and for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs and provided above, EVEN IF ARISING FROM NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. I further agree to the photographic and video release set forth above.

Parent/Legal Guardian Name: PLEASE PRINT \_\_\_\_\_

Parent/Legal Guardian Address : \_\_\_\_\_

\_\_\_\_\_ Emergency Contact # \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_