## REQUEST FOR AKA EVENT SANCTIONING

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NAME OF EVENT:			DATE OF EVEN	1T:/	_/
LOCATION:					
LOCATION:	STATE:	ZIP/POS	STAL CODE:		
FEE PAID BY: CHECK					
Kite Event: \$100.00	Club Event(s): \$150.	00 per year	Club Events + One	Public Event:	\$200.00
Credit Card Number:				Exp. Date:	/ /
Cardholder Name (Print):_ Signature:					
All four of the following pos Association (AKA) both at same person may hold the separate AKA members lis	the time sanctioning is a positions of "Sponsor"	requested an and "Chairpe	d throughout the dura erson" but there must	ation of the eventure that the state of the	ent. The an three
CHAIRPERSON:					
Name:				_	
Address:	Stat	e. Zin:			
Phone: ( )	or ( )	c zip. -			
Email:					
SPONSOR:				-	
Name:				_	
Address: City:	Stat	o: Zin:			
Phone: ( )	or ( )	e zip. -			
Email:				_	
SAFETY COORDINATOR	S:				
Name:				_	
Address: City:		o: 7in:			
Phone: ( )		e zip. -			
Email:	o. (			_	
Name					
Name:				-	
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City: Phone: ( )	or ( )	e ∠ıþ. -			
1 11011C. ( <i>)</i>					

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	AND SITE including activities, ages, competition levels and events, inces from power lines and airports, etc. Attach a map if necessary.
,,,,	,
Would you like this event to be listed as a	n AKA Sport Kite Conference Event? (Yes) (No)
Please list any additional named insureds Cyncity Parks and Recreation Departmen	and their relationship to the event. Example: XYZ Kites - Sponsor; t - Landlord
The undersigned request sanctioning for t	his event and acknowledge that:
1. They have read and understand the re Sanction for Your Kite Event" and that the	quirements as set forth in the information sheet "Obtaining AKA ir event complies with said requirements,
2. The AKA strongly recommends that ev sample waiver is included with this sanction	rents have participants sign a waiver and release of liability. (A on request.)
3. They have discussed this event with the	e Regional Director for the region in which the event will be held.
printed publicity, T-shirts, and announcem	sponsor equal to that given to any other sponsor, including nents over the P.A. system. They will provide opportunity and space AKA will provide a recruitment poster and membership forms, if
	e resulting insurance coverage is intended as a benefit of AKA assize that it is for AKA members only. Abuse of this program could ge.
SIGNATURES:	
Chairperson	Sponsor

PLEASE MAIL OR EMAIL THE FOLLOWING FORM ALONG WITH ANY NECESSARY DOCUMENTATION AND FEES TO:

## (Sample)

## **WAIVER AND RELEASE OF LIABILITY**

By participating in the	, I agree to:				
<ul> <li>Engage in and promote safe, responsible flying, and to adh</li> </ul>	nere to all event safety rules.				
• Inspect all facilities, fields, and equipment prior to particip share any safety concerns with event organizers.	pating and to immediately				
<ul> <li>Acknowledge that kite flying may involve risk of serious in resulting from my actions or those of others.</li> </ul>	jury and/or economic losses				
• Assume this risk and agree not to sue event sponsors, organizers, owners and lessors of event locations, and event participants, as well as the American Kitefliers Association, its directors, agents, and volunteers, for losses, damages, property damage, or injury.					
I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.					
Name of Participant	Age (if under 18)				
Signature of Participant					
Signature of Parent/Guardian of participant under 18					
Please note that, by signing in behalf of a participant less than 18 y parent/guardian also expressly agrees to all of the above.	years of age, the				
Date					