



Skagit Valley Solo Piping & Drumming Entry

(permissible to copy)

Entry Deadline: Postmarked by June 9, 2017

Name:

Class/Grade:

Address:

City:

State/Provnc: Postal Code

Country: Phone:

E-mail:

Birthdate: Age as of July 8, 2017 (if under 18):

Tartan:

RELEASE AND HOLD HARMLESS AGREEMENT/Credit Card Authorization

I hereby represent that I wish to participate in the Skagit Valley Highland Games & Celtic Festival on July 8 & 9, 2017 sponsored by Celtic Arts Foundation (CAF). I recognize that any outdoor activity may involve certain dangers, including, but not limited to, the hazards of the forces of nature, and the actions of other participants and other persons unaffiliated with CAF. I understand that these hazards produce a risk of physical harm or death, as well as a risk of loss or damage to my personal property. I further understand and agree that CAF would not be able to sponsor such Events without some form of agreement providing protection for CAF and its officers, directors, paid staff and volunteer workers.

In consideration of, and as part payment for, my privilege to participate in the Skagit Valley Highland Games & Celtic Festival, I hereby release the City of Mount Vernon, WA, CAF and its officers, directors and volunteer workers from any and all liability, claims and/or causes of action arising out of, or in any way connected with, my participation in any and all of the activities of the Event. I personally assume all risks in connection with these activities, and further agree to hold the City of Mount Vernon, WA and CAF and its officers, directors, paid staff and volunteer workers harmless from and against any and all liability, claims and/or causes of action which I may have arising from my participation in any and all of the activities of the Event, including, but not limited to, those involving negligence on the part of such officers, directors, paid staff or volunteer workers, which result in personal injury or death to myself and/or loss or damage to my personal property. The terms of this agreement shall bind myself and my heirs, assigns, and personal representatives.

If submitting credit card information for payment of registration fees, my signature here also authorizes the Celtic Arts Foundation to process a charge against my account in the amount indicated in the "Total Amt. Enclosed" field on this page.

I agree to allow Celtic Arts Foundation to photograph or record my activities, or those of the competitor for whom this application is being submitted, at the Event(s) for promotional purposes.

I have fully informed myself of the rules and regulations for participating in events for the Skagit Valley Highland Games, and the contents of this release and hold harmless agreement by reading it before I have signed it.

**** NEW:** You may submit your entry via e-mail, and pay online on our secure server. To submit entry via e-mail, type your name and the date in the following fields thereby, thereby indicating your understanding of and approval of the above conditions.

I agree to the above conditions, as indicated here by my typed name and date:

Name Date

Signature (if manually submitting): _____ Date: _____
(Parent or guardian if entrant is not at least 18 years of age.)

Printed Name: _____

Competitor Name Class/Grade:

Piping and Drumming Events

Please refer to BCPA competition rules at www.bcpipers.org for details of the music requirements for these events.

Piping (click on box to enter event, calculations made automatically):

- | | | | |
|--|--|--|---|
| Grade V | Grade IV | Grade III | Grade II |
| <input type="checkbox"/> 111 2/4 March | <input type="checkbox"/> 121 2/4 March | <input type="checkbox"/> 131 2/4 March | <input type="checkbox"/> 141 MSR |
| <input type="checkbox"/> 112 Slow Air | <input type="checkbox"/> 122 Piob. Ground plus 1 | <input type="checkbox"/> 132 Strathspey & Reel | <input type="checkbox"/> 142 Piobaireachd |
| | <input type="checkbox"/> 124 6/8 March | <input type="checkbox"/> 133 Piobaireachd | <input type="checkbox"/> 143 Hornpipe & Jig |

- | | | |
|---|---|--|
| Grade I | Open Piping | Adult |
| <input type="checkbox"/> 151 MSR | <input type="checkbox"/> 161 MSR | <input type="checkbox"/> 172 Slow Air |
| <input type="checkbox"/> 152 Piobaireachd | <input type="checkbox"/> 162 Piobaireachd | <input type="checkbox"/> 173 6/8 March |
| <input type="checkbox"/> 153 Hornpipe & Jig | <input type="checkbox"/> 163 Hornpipe & Jig | <input type="checkbox"/> 174 Piob. Ground plus 1 |

If non-BCPA member, number of piping events entered (will be charged \$4.50 per event)

Subtotal Piping

Drumming (click on box to enter event, calculations made automatically):

- | | | |
|---|---|---|
| Grade IV | Grade III | Grade II |
| <input type="checkbox"/> 221 2/4 March | <input type="checkbox"/> 231 2/4 March | <input type="checkbox"/> 241 MSR |
| <input type="checkbox"/> 222 6/8 March | <input type="checkbox"/> 232 6/8 March | <input type="checkbox"/> 242 Hornpipe & Jig |
| Grade I | Open Drumming | Grade II Tenor Drumming |
| <input type="checkbox"/> 251 MSR | <input type="checkbox"/> 261 MSR | <input type="checkbox"/> 342 6/8 March (4 parts only) |
| <input type="checkbox"/> 252 Hornpipe & Jig | <input type="checkbox"/> 262 Hornpipe & Jig | |

- | | |
|----------------------------------|---|
| Grade I Tenor Drumming | Open Tenor Drumming |
| <input type="checkbox"/> 351 MSR | <input type="checkbox"/> 362 Hornpipe & Jig |

If non-BCPA member, number of drumming events entered (will be charged \$4.50 per event)

Check/Money Order Payments

Make checks payable to: Celtic Arts Foundation
 Mail to: Celtic Arts Foundation, PO Box 1342, Mount Vernon, WA 98273

Subtotal Drumming

Total Entry Fee Due

We recommend and prefer competitors pay online using our secure server at www.CelticArts.org. If you prefer to manually pay with a credit card, please complete the information below and send to us with your entry form. Please DO NOT provide that information otherwise.

Manual Credit Card Option

Enter Number, Expiration Date and zip/postal code below, print entry and send to us at address above

VISA/MC or AMEX # Expiration Date

Postal/Zip Code where bill is sent Name on card: