

# LAKE RIDGE

## ASSOCIATION

12350 Oakwood Drive  
 Lake Ridge, Virginia 22192-1928  
 Local (703) 491-2154  
 Metro (703) 550-9597  
 Fax (703) 497-7145  
[www.lakeridgeva.com](http://www.lakeridgeva.com)

### Special Event Registration

Please Print:

<b>Applicant or Parent/Guardian Name:</b>		
<b>Address:</b>	<b>Phone #1:</b>	<b>Phone #2:</b>
<b>City/Zip Code:</b>	<b>E-mail:</b>	

<b>Participant Name(s)</b>	<b>Age</b>	<b>D.O.B.</b>	<b>Activity</b>	<b>Space #</b>	<b>Business/Product</b>

Total Amount: \$

#### **Payment Methods:**

**Mailed registration should include payment by check, payable to "LRPRA", in order to secure registration.** Check, money order, and credit or debit (with 3% processing fee + \$.30) are accepted at the Association office.

#### **Refund Policy:**

The program cost minus **\$10.00 processing fee** will be refunded with **formal request** if received at least **5 business days prior** to the start date of the activity. If a program cost is less than \$10.00, no refunds will be given unless the event is cancelled by LRPRA.

#### **Hold Harmless & Photo Release Agreement:**

I hereby waive, release and hold harmless Lake Ridge Association from any and all damages, actions, claims, or causes of action for any loss, damage, or injury suffered by guests, my invitees, or me during participation in this program. I also attest that participant is physically fit and in good health to participate. In addition, by signing below, I voluntarily allow Lake Ridge Association to publish any photos of me, my guests or participating family at their events for use in the Lake Ridge Today magazine and on the Association website, [www.lakeridgeva.com](http://www.lakeridgeva.com), to advertise the community atmosphere of the Association.

<b>Applicant or Parent/Guardian Signature (18+ years of age):</b>	<b>Date:</b>
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