

HEARTS TAKE FLIGHT



Pull-a-Plane Challenge

www.heartstakeflight.org

Saturday, April 15, 2017

9:00 am

YOUR team of 5 will attempt to tug an airplane across the tarmac at Hollingshead Aviation (300 Doug Warpoole Road, Smyrna)



PICTURE YOUR TEAM HERE

To Benefit

Achieve with us.



Prizes awarded for the
Fastest pull
Slowest pull
Most enthusiastic team
Team that raises the most money

A FUN-PACKED DAY FOR THE ENTIRE FAMILY

Free Parking ★ Free Admission for Spectators ★ Kid's Zone
★ Emergency Service Vehicles To Tour ★ Live Entertainment ★
Games ★ Prizes ★ Food Vendors ★ Plenty of Fun!

HEARTS TAKE FLIGHT



Pull-a-Plane Challenge



The Arc[™]

Tennessee



The Arc Tennessee advocates for the rights and full participation of all people with intellectual and/or developmental disabilities.



We support, empower, connect and inform individuals and families, influence public policy, increase public awareness and inspire inclusive communities.



<http://www.thearctn.org>



Thank you for your support of the Hearts Take Flight Pull-a-Plane Challenge!

HEARTS TAKE FLIGHT



Pull-a-Plane Challenge

SELF-ADVOCATE TEAM REGISTRATION

Thank you for organizing a team for the
Hearts Take Flight ✈ Pull-a-Plane Challenge

TEAM NAME _____

Team "Type" - Choose One: Company Club/Organization School Friends/ Family
 Other—please specify _____

Representing / Company Name (If applicable) _____

Team Captain Name _____

Team Captain Street Address _____

City _____ State _____ Zip Code _____

Team Captain Phone _____ Cell _____

Team Captain E-mail _____

Team Participation Fee: \$100 (minimum, \$20 per person, 5 persons to a team required)

Payment: Invoice Company Invoice me

Payment enclosed. Make checks payable to: *The Arc Tennessee.*

Credit Card # _____ Exp Date _____
Name on Credit card _____
Billing Address on Card _____

Teammates will be raising money. Register at:

<http://www.firstgiving.com/arc-tn/hearts-take-flight-pull-a-plane-challenge-2017>

Please complete the TEAM REGISTRATION FORM and submit forms to:

The Arc Tennessee
Attn: Lori Cutler
545 Mainstream Dr. Suite 100
Nashville, Tennessee 37228

E-mail: lcutler@theartcn.org
Fax: (615) 248-5879
Phone: (615) 248-5878 ext 17

HEARTS TAKE FLIGHT



Pull-a-Plane Challenge

TEAM PARTICIPANTS

TEAM NAME _____

Team Captain Name _____ Phone # _____

Team Captain Email _____

Participants under 18 must have parental/guardian approval.

Deadline for submission of team roster is April 1, 2017. Registration is open through the day of the event but to guarantee t-shirts we need registrations no later than April 1.

	First Name, Last Name	Email Address	Date of Birth	T Shirt Size (Circle One)	Under Age 18?
1.			/ /	S M L XL 2XL 3XL	
2.			/ /	S M L XL 2XL 3XL	
3.			/ /	S M L XL 2XL 3XL	
4.			/ /	S M L XL 2XL 3XL	
5.			/ /	S M L XL 2XL 3XL	
6.			/ /	S M L XL 2XL 3XL	
7.			/ /	S M L XL 2XL 3XL	
8.			/ /	S M L XL 2XL 3XL	
9.			/ /	S M L XL 2XL 3XL	
10.			/ /	S M L XL 2XL 3XL	
ALT			/ /	S M L XL 2XL 3XL	
ALT			/ /	S M L XL 2XL 3XL	



ONE COPY PER PARTICIPANT PLEASE

Participant's Team (or Captain) Name:

Participant's Name:
 Last _____ First _____

THE ARC TENNESSEE, SMYRNA/RUTHERFORD COUNTY AIRPORT, HOLLINGSHEAD AVAIATION WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of participating in The Arc Tennessee Hearts Take Flight *Pull-a-Plane Challenge*, I represent that I understand the nature of the aircraft pulling events and that I am qualified, in good health, and in proper physical condition to participate in such an activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity.

I fully understand that aircraft pulling events involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own or others actions, or inactions, or those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the activity.

I hereby release and discharge The Arc Tennessee, Smyrna/Rutherford County Airport or Hollingshead Aviation, its parent and affiliated companies, and their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the "RELEASEES" herein) from liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Participation in this event constitutes permission to use photos and videos of you in future promotional materials.

I am OVER the age of 18. I am UNDER the age of 18.* Date: _____

 PRINTED name of participant

 SIGNATURE of Participant

 Phone Number - DAY OF EVENT

 Other Phone Number

 Email

 Mailing Address

 City

 State

 Zip

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\* FOR THOSE UNDER 18 YEARS OF AGE: Printed name of parent/legal guardian and signature of parent/legal guardian

\_\_\_\_\_  
 PRINTED name of parent

\_\_\_\_\_  
 SIGNATURE of Parent