



Thank you to our 2024 Glow Hike Main Sponsor



Wisconsin Public Service
Foundation

A Night Hike in support of Maywood Environmental Park



Maywood
3615 Mueller Road
Sheboygan, WI 53083
(920) 459-3906
maywood@sheboyganwi.gov
GoMaywood.org

Maywood is a 135-acre environmental park in Sheboygan, WI. As the City of Sheboygan's largest park, it offers six unique habitats for visitors to explore and learn about nature. The Trust of Maywood, a 501c3 non-profit, provides support for the park including funding for park improvements and environmentally themed programs and events. The park is open to the public, free of charge, 365 days a year.

ABOUT THE GLOW HIKE

Your participation in Maywood's Glow Hike helps support environmental education programs and park improvement projects

Self-guided 3/4 Mile Hike
Saturday, October 19
Hike runs 6:30pm-8:45 pm
Post-Walk events until 9 pm

Follow colorful luminaries along trails through Maywood Park and experience the park in a new light! First 100 registered participants will receive an eco-friendly reusable glow stick to enhance the evening under the stars. Enjoy a 3/4 mile multi-color luminary-lit trail, followed by glow-in-the-dark games and activities with music and more colorful lighting! The event will feature a cosmic glowing beer garden area for adults. Snacks, beverages, and additional glow items will be available for sale at the event. Please dress appropriately for the weather, as the event will take place outdoors. In case of severe weather or extreme cold, the event will be modified to take place indoors.

For more information, contact Maywood at (920) 459-3906 or maywood@sheboyganwi.gov

Maywood Glow Hike 2024 Registration
One form per person. Please Print. Return form AND waiver.

Name _____

Mailing Address _____

City _____ ST _____ Zip _____

Phone (_____) _____

Email _____

Date of Birth or Age as of 6/1/24 _____

Glow Hike at Maywood (10/19/2024)

Maywood Association Member \$7/person

General Admission \$10/person

I have read and agree to the waivers and releases.

Signature

Date

Signature of parent/legal guardian for participants under 18

Cash or check accepted for mail-in and in-person registrations. Return form, waiver, and payment to: Maywood, 3615 Mueller Rd, Sheboygan, WI 53083. To pay with credit card please register via RunSignUp using the QR code on the front of this brochure.

Office use only Participant # _____
Date recd _____ Amt _____ Check/Cash _____

Maywood Glow Hike
October 19, 2024

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT, PARENTAL CONSENT, AND PHOTO RELEASE

In exchange for permission for me and/or my minor child (hereafter my child) to participate in the Maywood Glow Hike (hereafter the Event), I acknowledge and agree to, on my own/my child's behalf, and on behalf of my/my child's personal representatives, heirs, assigns, executors, administrators, next of kin, and/or legally appointed or designated representatives to the following:

RELEASE, WAIVER, AND ASSUMPTION OF RISK

I HEREBY RELEASE, DISCHARGE AND PROMISE NOT TO SUE Ellwood H. May Environmental Park (Maywood); Ellwood H. May Environmental Park Association of Sheboygan County, Inc.; Environmental Park Trust of Sheboygan County; and the City of Sheboygan, their respective administrators, directors, agents, officers, volunteers, and employees; other participants; any sponsors, advertisers, and, if applicable, owners and landlords of premises on which the Event takes place (each considered one of the "RELEASEES" herein); FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES OF WHATEVER KIND OR NATURE THAT I AND/OR MY CHILD SUFFER WHICH ARE CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE (BUT NOT RECKLESS OR INTENTIONAL CONDUCT) OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENCE RESCUE OPERATIONS. I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each RELEASEE from any loss, liability, damage, or cost which any may incur, if, despite this release and waiver of liability, and assumption of risk, I or anyone on my and/or my child's behalf, makes a claim against any RELEASEE.

I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY for losses, costs, and damages I and/or my child incur as a result of my and/or my child's participation in the Event. I acknowledge, understand, and agree to the following:

1. I/my child will not participate in the Event unless I/my child am/are medically able and properly trained.
2. If I and/or my child believe conditions are unsafe, I and/or my child will immediately discontinue participation in the Event.
3. The Event may include potentially hazardous activities with risks including but not limited to falls; contact with other individuals; the effects of the weather; traffic, and conditions of the road, trail, or body of water that may result in serious bodily injury, including permanent disability, paralysis, and death. These risks may be caused by my/my child's own actions, or inactions, those of other Event participants, the conditions in which the Event takes place, or the negligence of the "RELEASEES" named herein.
4. I attest that I/my child have read the rules (available at <https://gomaywood.org/wp->

content/uploads/2024/08/GlowHike2024-rules-web.pdf) of the Event scheduled for October 19, 2024, and will abide by them.

5. I/my child will abide by any decision of an Event official relative to any aspect of my/my child's participation the Event, including the right of any official to deny or suspend my/my child's participation for any reason whatsoever.
6. I understand that my/my child's registration fee for the Event is non-refundable.

PARENTAL CONSENT

If the registrant is under 18 years of age, incapacitated, or mentally challenged, I assert that I am the parent/legal guardian or otherwise authorized to execute a legally binding agreement on behalf of the registrant. By registering a child under 13, I agree and consent to the collection of that child's information which I am providing for the purposes of registration for participation in this Event.

PHOTO RELEASE

I understand that photos, videos, audio recordings, and/or written descriptions of myself, my child, and/or the Event, submitted by me/my child via print or electronic means or created by each RELEASEE may be used for legitimate publicity and promotion purposes by each RELEASEE or their authorized agents. I hereby waive my/my child's rights of privacy or publicity and grant permission to each RELEASEE to use such images, video footage, audio recordings, and written descriptions of me and/or my child, with or without my/my child's name, by each RELEASEE, its authorized agents and its sponsors in all forms of media without any further approval or compensation.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY AGREEMENT, PARENTAL CONSENT, AND PHOTO RELEASE (collectively "Agreement"), UNDERSTAND THESE TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT INCLUDING THE RIGHT TO SUE,

and have signed it freely and without any inducement or assurance of any nature. No RELEASEE or person on behalf of any RELEASEE has told me anything that is inconsistent with or contrary to the terms of this Agreement. I understand that, in reliance upon my signature on this form, voluntarily given, I may be permitted to participate in the Event. I intend it be a complete and unconditional release of all liability to the greatest extent allowed by the State of Wisconsin and its law. If any portion of this Agreement is held to be invalid, the balance shall continue in full force and effect.

I have carefully read this Agreement and understand its contents. I understand that I have the right to request a different release of liability terms by negotiating a separate agreement. However, by signing this release, I waive the right to negotiate different terms and agree to the terms contained herein. /Legal Guardian for participants under 18 year of age

A larger print version of this waiver can be obtained by calling (920) 459-3906 or emailing Maywood@sheboyganwi.gov