

**17th ANNUAL
DOCTORS LAWYERS WEEKEND WARRIORS
SURF FESTIVAL**

Sebastian Inlet State Park

Friday and Saturday

September 18th and September 19th 2009

Back up dates: September 25th and September 26th

Name _____
Address _____
City, State _____
Zip _____

Daytime Phone _____
Evening Phone _____
Email _____

Division:

Doctor _____
Lawyer _____
Weekend Warrior _____
Fossil (50 & over) _____
Wahine _____

T-Shirt (Men's sizes)

Small _____
Medium _____
Large _____
X-Large _____

DLWW HAT _____ **(\$25.00)**

WAIVER: In consideration of my signing this statement, I hereby for myself, my heirs and administrators assume any and all risks which might be associated with the surfing festival. I waive and release any and all rights and claims for damages which I may have against the organizers and all sponsors, the State of Florida, Sebastian Inlet State Park, Doctors, Lawyers, Weekend Warriors and The Boy's & Girl's Club of Brevard County, Florida and any and all others connected with this event, their representatives, successors, and do waive my rights for all and any injuries or damages of any kind whatsoever suffered by me as a result of taking part in the surfing festival and any related activities. I will also abide by the guidelines for this event.

Signature: _____ Date _____

Make checks payable to:

Jack Kirschenbaum in the amount of \$100.00 (no refunds, sorry)

Mail entry forms and check to: JACK A. KIRSCHENBAUM, GrayRobinson, PA,
P.O. Box 1870, Melbourne, FL 32901.

For further information contact Jack Kirschenbaum at:

jack.kirschenbaum@gray-robinson.com

(321) 727-8100 (office)

(321) 984-4122 (fax)

(321) 258-6356 (cell)