

**18<sup>th</sup> ANNUAL  
DOCTORS LAWYERS WEEKEND WARRIORS  
SURF FESTIVAL**

**Sebastian Inlet State Park  
Friday and Saturday**

**September 10<sup>th</sup> and September 11<sup>th</sup> 2010**

**Back up dates: September 17<sup>th</sup> and September 18<sup>th</sup>**

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** \_\_\_\_\_

**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 \$125.00 (no refunds, sorry, this is a charity fundraiser))***

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)