

ADULT



**FLASHLIGHT
EASTER
EGG SCRAMBLE**

April 9 | 8:30p | MacLean Park | Over \$10,000 in Prizes!

\$15 Tickets on sale at the Recreation Center Starting March 1st

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ADULT FLASHLIGHT Egg Scramble



Thursday, April 9, 8:30pm SHARP

Date:

Thursday, April 9, 8:30pm SHARP, Gates open at 7:45pm

Location

MacLean Park Adult Softball Fields

Registration Information

Registration begins March 1st

Adult Flashlight Egg Scramble participants must be 18 years or older.

ALL Fields will be COED fields this year.

Over 5,000 eggs and \$3,000 in prizes per field!

Each Participant will receive a wristband upon registration. DO NOT LOSE your wristband, it will be required to enter the event. NO EXCEPTIONS. If you lose your wristband you will be required to purchase a new one, if they are not already sold out. **If you lose your wristband and the event is sold out, you will be out of luck and will not be able to attend the event. There will not be a registrant list at the gate.**

ONLY 300 WRISTBANDS PER FIELD SOLD (UP TO 4 FIELDS). THEY WILL BE SOLD UNTIL SOLD OUT.

How to Register

Participants must register at the Lake Jackson Recreation Center

Cost

\$15 per Wristband

Methods of Payment

Visa, Discover, MasterCard, Cash, and Checks accepted

Make Checks payable to: City of Lake Jackson

Helpful Notes

Participants should bring a flashlight and a bag for collecting eggs.

NETS ARE NOT PERMITTED.

The event will start at exactly 8:30pm, if you are late, you will miss the event.

Children under the age of 18yrs, nor anyone without a wristband will not be allowed to enter the gates, please plan accordingly.

BABIES, CHILDREN, AND STROLLERS WILL NOT BE ALLOWED PAST THE GATE, YOU MUST ARRANGE CHILDCARE.

For more information call (979) 297-4533 or email mdoyle@lakejacksontx.gov

ADULT FLASHLIGHT Egg Scramble

Thursday, April 9, 8:30pm SHARP



Participant's Name: _____

Cell: _____

Email address: _____

Number of Wristbands Purchasing: _____ *(all wristbands are COED this year)*

PHOTOGRAPHY

I understand that City of Lake Jackson employees often take photographs of various community and/or athletic events throughout the community. I hereby grant the City of Lake Jackson permission to use my likeness or, if I am the parent or legal guardian of a minor child who is younger than 18 years of age, I give permission to use the minor's likeness in a photograph or other digital reproduction in any and all of its publications, including website entries, without payment or any other consideration. I further give permission to the City of Lake Jackson to share this image with third parties for use in any and all of its publications, including website entries, without payment or other consideration.

REFUND/CANCELLATION POLICY

Once event registration has been completed, it is considered final. No refunds will be given for this event.

The Lake Jackson Recreation Center reserves the right to cancel events due to insufficient registration, inclement weather, or other circumstances which would make the event non-viable. In this case, participants will be notified by email or phone of the cancellation and a full refund will be given.

CONSENT TO PARTICIPATE AND HOLD HARMLESS

I understand and agree to indemnify, save and hold harmless the City of Lake Jackson, its agents and employees, from and against all claims, damages, losses and expenses (including attorney's fees, medical, and ambulance cost) that may arise out of my child's use of or presence on city property or arising out of his or her participation in any activities or functions that may occur during the program, including contact with persons, animals or creations of nature of any and every kind that exist on property that may or may not be under the control of the City of Lake Jackson. In case of an emergency and I cannot be contacted, then I hereby authorize medical treatment.

By signing below, you are affirming you have read, understand and agree to comply with the terms and conditions of this agreement.

Signature

Date

FOR OFFICE USE ONLY

Employee Signature: _____ Date: _____ Receipt _____

Payment: Cash _____ Check Number _____ Credit Card: Visa MC Discover **CC AUTH** _____