



**May 20th - 5pm**  
**During the Spring Festival**

## **ARE YOU UP TO THE CHALLENGE?**

A UNIQUE SCAVENGER HUNT through Downtown Naugatuck and the surrounding area. Similar to the television show, "The Amazing Race", teams will receive clues leading to challenges at different locations throughout the center of town.

Each challenge completed earns your team points. Knowledge of the area will give you an advantage, but teams can use their phones, Internet and people on the street to help them solve the clues. The teams will have 45 minutes to complete the clues. Prizes will be awarded. Proceeds will benefit the Naugatuck YMCA.

DIVISIONS: PARTNER DIVISION (FEATURING TEAMS OF TWO) - \$30 PER TEAM

FAMILY DIVISION (CONSISTING OF UP TO 5 MEMBERS) - \$45 PER FAMILY

SOLO DIVISION (WE WILL MATCH YOU WITH A PARTNER) - \$15 PER PERSON

DAY OF REGISTRATION:

PARTNER & SOLO DIVISION = \$20 PER PERSON/ FAMILY DIVISION = \$50 PER FAMILY



**HOSTED BY THE NAUGATUCK YMCA**

**284 Church Street, Naugatuck CT 203-729-9622**

**[www.naugatuckymca.org](http://www.naugatuckymca.org)**

**<https://www.raceentry.com/race-reviews/naugy-challenge>**

**Register Today!**

TEAM NAME: \_\_\_\_\_ INDIVIDUAL: \_\_\_\_\_ PARTNER: \_\_\_\_\_ FAMILY (5): \_\_\_\_\_

PARTICIPANT (1) NAME \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARTICIPANT (2) NAME \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARTICIPANT (3) NAME \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARTICIPANT (4) NAME \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

PARTICIPANT (5) NAME \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS \_\_\_\_\_

WORK/CELL NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PARTICIPATION/INSURANCE/PHOTO & VIDEO WAIVER

In consideration of the Naugatuck YMCA permitting myself or my child to participate in this program, I hereby for myself, my heirs, administrators and assigns waive and release any and all rights and claims of any nature I may have against the Naugatuck YMCA and any organizations connected with this program, their representatives, successors, and assigns for any and all injuries or damages of any nature my child may suffer while taking part in any activities connected with this program.

I also acknowledge that the YMCA is not responsible for primary medical insurance coverage and agree to take full responsibility for fees and cost incurred in the event myself or my child is injured while participating in the program. The YMCA recommends that all participants have a physician's approval before participation in physical activity or sport.

I hereby give the Naugatuck YMCA, or those for whom it is acting the absolute right and permission to take, copyright, use and publish photographs and videos in any and all media of me and my child(ren) in purposes of YMCA art, advertising, education, promotion or any other purpose consistent with the YMCA mission.

_____	_____
PARTICIPANT (1)/ GUARDIAN SIGNATURE	DATE
_____	_____
PARTICIPANT (2)/ GUARDIAN SIGNATURE	DATE
_____	_____
PARTICIPANT (3)/ GUARDIAN SIGNATURE	DATE
_____	_____
PARTICIPANT (4)/ GUARDIAN SIGNATURE	DATE
_____	_____
PARTICIPANT (5)/ GUARDIAN SIGNATURE	DATE