

**2023 HIGHWAY OF VETERANS (May 26, 2023)  
VETERAN REGISTRATION (ENLISTMENT) FORM**

Deadline May 20, 2023  
(FREE FOR VETERAN-\$5 DONATION FOR 1-GUEST)  
11am. At Park – Weather Permitting (Otherwise Columbus Co. Fairgrounds)

\*Name \_\_\_\_\_ \*Telephone \_\_\_\_\_

\*Address \_\_\_\_\_

\*City/State/Zip \_\_\_\_\_

\*Age \_\_\_\_ \*Male \_\_ or \*Female \_\_

\*Branch of Service \_\_\_\_\_ \*Years of Service \_\_\_\_\_ \*Conflicts \_\_\_\_\_

\*Medals \_\_\_\_\_

\*I will attend the Veterans Appreciation Luncheon? \_\_Yes \_\_No      Guest \_\_Yes \_\_No

\*E-mail \_\_\_\_\_

\*Emergency Contact \_\_\_\_\_ Phone# \_\_\_\_\_

\*Wall Of Honor-Bring a picture of Veteran in Uniform (if available) to be added to Wall of Honor\*

\*Addition Information you may want to add about yourself \_\_\_\_\_

\*Optional Donation \_\_\_\_ Cash      \_\_\_\_ Check      \_\_\_\_\_ Amount

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my family, my heirs, executors & administrators, forever waive, release & discharge any and all rights & claims for damages & caused of suit or action, known, that I have against the Veterans Memorial Park of America, Inc., Columbus County Fairgrounds and Board, State of North Carolina, County of Columbus, Committee Members, Officers-Directors, Volunteers, all sponsors, agents, representatives, successors, & assigns of Veterans Memorial Park of America, for any and all injuries suffered by me in this event.

I understand that police protection will not be provided for the event area and the parking area. I attest that I am physically fit to participate in this event. I also agree to abide by any decision of an appointed committee member or medical official to my ability to safely continue. I further assume and will pay my own medical expenses in the event that of an injury, illness, death, or other incapacity regardless of whether I have authorized such expense. Further, I hereby grant full permission to the Veterans Memorial Park of America, Inc. and/or agents hereby authorized by them, to use any photographs, videotapes, motion pictures, recording, or any other record of this event for any legitimate purpose at any time without compensation.

I have read this waiver carefully & understand it.

\_\_\_\_\_  
\*Signature of Veteran

\_\_\_\_\_  
\*Date

Received Date: \_\_\_\_\_

Veterans Memorial Park of America (VMPA)  
(910) 840-3848  
P.O. Box 2046  
Whiteville, N.C. 28472