

Benefitting Special Olympics of Allegany County & Other Developmentally Disabled Programs

HOOLEY PLUNGE



2025

Take the Plunge!

REGISTRATION AT 10AM • PLUNGE AT 1PM

**SATURDAY,
MARCH 1, 2025**

ON THE BEACH AT ROCKY GAP STATE PARK • 301-697-6676

Mr./Mrs./M _____

Organization/Group Name (if applicable) _____

Phone _____ Email _____

Address _____

City _____ State _____ Zip _____

Make All Checks Payable to Wamba Caravan #89. Donations Are Tax Deductible To The Extent Of The Law.

T-shirt Size (circle one) Small Medium Large XL XXL XXXL

Total Money Raised in Pledges \$ _____

Donor's Name	Address/Phone	Amount
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Make online donations with **PayPal** using your credit card or bank account!

Visit www.hooleyplunge.com for details.

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Take the Plunge!

SATURDAY, MARCH 1, 2025

You must bring your completed registration form with you and **all money raised** (checks preferred) and turn in at registration desk. Dunk attire is swimsuit only, t-shirt optional. Shoes or surf mocs are required. **With your \$50 minimum in pledges, you will receive the official Plunge t-shirt.** With \$500 or more in pledges you will receive the official Plunge Hoodie.

2024 SPECIAL OLYMPICS WAIVER

I _____ understand that the Wamba Caravan #89, The International Order of The Alhambra, Rocky Gap State Park, and/or volunteers of the Hooley Plunge assume no responsibility for injuries, which I may sustain as a result of my physical condition or resulting from my participation in the Hooley Plunge. I expressly acknowledge on behalf of myself and my heirs that I assume risk for any and all injuries and illnesses which may result from my participation in this activity. I hereby release and discharge the Wamba Caravan #89, The International Order of The Alhambra, its Board of Directors, assigns and/or employees from any and all claims of injury, death, loss or damage which I may suffer as a result of my participation in the Hooley Plunge.

I understand that the Wamba Caravan #89, The International Order of The Alhambra and Rocky Gap State Park are not responsible for personal property lost or stolen while on the premises of the Hooley Plunge.

I give permission to the Wamba Caravan #89, The International Order of The Alhambra to use, without limitation, or obligation, photographs, film footage, or tape recordings which may include my image or voice for purposes of promoting or interpreting the Hooley Plunge.

Name _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____ Email _____

DOB ____/____/____

Signature of Participant _____ Date _____

Signature of Parent/Guardian (if under 18) _____ Date _____