

OFFICIAL ENTRY FORM

DATES: NOVEMBER 5TH-6TH, 2011 LOCATION: SEBASTIAN INLET, FLORIDA

WAITING PERIOD FROM NOVEMBER 12TH - 13TH, 2011

QUIKSILVER.COM/SURF

- QUIKSILVER SKINS ENTRY \$100.00
- DEADLINE NOVEMBER 2RD, 2011. ANY ENTRY
 FORM SUBMITTED AFTER NOVEMBER 2, 2011 WILL
 BE SUBJECT TO A TWENTY DOLLAR (\$20.00) PROCESSING FEE.

\$13,250 PRIZE PURSE INCLUDING:

- \$3,000 TO OVERALL SKIN WINNER
- \$250 ESM AIRSHOW

MAIL YOUR ENTRY TO:

EAST COAST TEAM & MARKETING

QUIKSILVER

5100 HWY A1A

MELBOURNE BEACH FL 32951

MAKE ALL PAYMENTS OUT TO QUIKSILVER PROMOTIONS EAST

NAME (FULL)	D.O.B	AGE:
ADDRESS		
CITY	STATE	710
CIT 7	STATE	
CELL #	E-MAIL	
SOCIAL SECURITY #		
	NTACT:	
RELATIONSHIP	PH. #	
TAKING MEDICATION? YES NO	ALLERGIC TO ANY MEDICATIONS? YES	10
WHAT MEDS?		

I UNDERSTAND THAT SURFING IS HAZARDOUS AND I HAVE MADE A VOLUNTARY CHOICE TO PARTICIPATE IN THIS EVENT DESPITE THE INHERENT RISKS. I ACCEPT FOR MYSELF ANY RISKS ASSOCIATED WITH THE EVENT AND PROMISE NOT TO SUE QUIKSILVER, INC. OR ANY OF ITS AFFILIATES, OR ANY OTHER SPONSORS, CO-SPONSORS, PROMOTERS OR HOSTS FOR ANY AND ALL LOSSES AND INJURY TO PERSON OR PROPERTY ARISING FROM OR RELATED TO THE EVENT.

IN CONSIDERATION OF ACCEPTING THIS REGISTRATION, I HEREBY RELEASE AND PROMISE NOT TO SUE QUIKSILVER OR ITS AFFILIATES, AND ANY OF THEIR AGENTS, OFFICERS, DIRECTORS, REPRESENTATIVES OR EMPLOYEES, OR ANY OTHER SPONSORS, CO-SPONSORS, PROMOTERS OR HOSTS FOR ANY CLAIMS, DEMANDS, CAUSES OF ACTION, LOSSES, EXPENSES, COSTS AND LIABILITY OF ANY NATURE WHATSOEVER WHICH I MAY HEREAFTER HAVE AGAINST ANY OF THEM ARISING OUT OF OR IN CONNECTION WITH THE EVENT.

I IRREVOCABLY GRANT TO QUIKSILVER, INC., ANY SPONSOR AND THEIR RESPECTIVE AFFILIATES THE RIGHT TO PHOTOGRAPH AND VIDEO ME AND THE RIGHT TO USE MY NAME, LIKENESS, PORTRAIT, RECORDED VOICE, ADDRESSES, PHOTOGRAPHS, FILM AND VIDEOS IN ADVERTISING, MARKETING, PRODUCT PACKAGING OR OTHER USES, WITHOUT COMPENSATION AND WITHOUT RESTRICTION AS TO DURATION, GEOGRAPHY, MEDIA OR FREQUENCY. IN THE EVENT OF ANY DISPUTE ARISING IN CONNECTION WITH MY PARTICIPATION IN THE EVENT, ANY SUCH DISPUTES SHALL BE GOVERNED BY CALIFORNIA LAW AND MUST BE BROUGHT IN THE STATE OR FEDERAL COURTS LOCATED IN ORANGE COUNTY, CALIFORNIA AND I HEREBY IRREVOCABLY SUBMIT TO SUCH JURISDICTION.

SIGNATURE:		DATE:			
F MINOR UNDER THE AGE OF 18, PARENT OR GUARDIAN MUST SIGN: HAVE READ THE ABOVE DISCLAIMER, ASSUMPTION OF RISK AND WAIVER, AND ACKNOWLEDGEMENT AND CONSENT AGREEMENTS, FULLY UNDERSTAND THE TERMS OF EACH, UNDERSTAND THAT I AND THE ABOVE PARTICIPANT HAVE GIVEN UP SUBSTANTIAL RIGHTS BY MY SIGNING THIS FORM AND AGREEING TO THESE TER AND I SIGN THIS FORM AND AGREE TO THESE TERMS FREELY AND VOLUNTARILY AND WITHOUT INDUCEMENT F					
MYSELF AND ON BEHAL	F OF THE ABOVE PAR	TICIPANT.			
PARENT OR GUARDIAN NA	ME (PRINT)	SIGNATURE:			
SUBJECT TO AVAILAE	BILITY. LIMITED TIME	OFFER.			
OFFICE USE ONLY:					
PAID:		_			
DATE RECEIVED ENTR	RY & PAYMENT:	_			
SIGNED: WAIVER	RELEASE	MINOR WAIVER			

Form W-8BEN

(Rev. February 2006)

Department of the Treasury Internal Revenue Service

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding

▶ Section references are to the Internal Revenue Code.
 ▶ See separate instructions.
 ▶ Give this form to the withholding agent or payer. Do not send to the IRS.

OMB No. 1545-1621

	ot use this form for: U.S. citizen or other U.S. person, including a resident alien individual	Instead, use Form:
of • A • A for	person claiming that income is effectively connected with the conduct a trade or business in the United States	on, r that is
Note	iming the applicability of section(s) 115(2), 501(c), 892, 895, or 1443(b) (see instructions)	
	person acting as an intermediary	W-8IMY
Pa	Identification of Beneficial Owner (See instructions.)	
1	Name of individual or organization that is the beneficial owner 2 Count	try of incorporation or organization
3	Type of beneficial owner:	Partnership Simple trust
		International organization
4	Central bank of issue Tax-exempt organization Private foundation Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-	of address.
	City or town, state or province. Include postal code where appropriate.	Country (do not abbreviate)
5	Mailing address (if different from above)	<u> </u>
	City or town, state or province. Include postal code where appropriate.	Country (do not abbreviate)
6	U.S. taxpayer identification number, if required (see instructions) 7 Foreign tax id SSN or ITIN EIN	lentifying number, if any (optional)
8	Reference number(s) (see instructions)	
Pa	t II Claim of Tax Treaty Benefits (if applicable)	
9	I certify that (check all that apply):	
a b	The beneficial owner is a resident of within the meaning of the income tax treaty If required, the U.S. taxpayer identification number is stated on line 6 (see instructions).	between the United States and that country.
	The beneficial owner is not an individual, derives the item (or items) of income for which the treaty be applicable, meets the requirements of the treaty provision dealing with limitation on benefits (see institution).	
d	The beneficial owner is not an individual, is claiming treaty benefits for dividends received from a fore U.S. trade or business of a foreign corporation, and meets qualified resident status (see instructions).	
е	The beneficial owner is related to the person obligated to pay the income within the meaning of secti Form 8833 if the amount subject to withholding received during a calendar year exceeds, in the aggre	
10	Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provision	
	treaty identified on line 9a above to claim a	
	Explain the reasons the beneficial owner meets the terms of the treaty article:	
Pa	t III Notional Principal Contracts	
11	I have provided or will provide a statement that identifies those notional principal contracts from which connected with the conduct of a trade or business in the United States. I agree to update this statement that identifies those notional principal contracts from which connected with the conduct of a trade or business in the United States. I agree to update this statement that identifies those notional principal contracts from which connected with the conduct of a trade or business in the United States.	-
	rt IV Certification	slief it is two a sewest and sewester.
furthe 1 I ar	r penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and be ir certify under penalties of perjury that: In the beneficial owner (or am authorized to sign for the beneficial owner) of all the income to which this form relates, beneficial owner is not a U.S. person,	eller it is true, correct, and complete. I
3 The not s 4 For	income to which this form relates is (a) not effectively connected with the conduct of a trade or business in the United Stubject to tax under an income tax treaty, or (c) the partner's share of a partnership's effectively connected income, and broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.	
	ermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income o rithholding agent that can disburse or make payments of the income of which I am the beneficial owner.	of which I am the beneficial owner or
Sig	Here Signature of beneficial owner (or individual authorized to sign for beneficial owner) Date (MM-DD-Y	
_		- WORN -

Form (Rev. October 2007) Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

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e 2.	Name (as shown on your income tax return)				
on page	Business name, if different from above				
Print or type Specific Instructions on	Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=p ☐ Other (see instructions) ▶	artnership) ▶		Exempt payee	
Print ic Inst	Address (number, street, and apt. or suite no.)	umber, street, and apt. or suite no.) Requester's		ddress (optional)	
Specif	City, state, and ZIP code				
See	List account number(s) here (optional)				
Part	Taxpayer Identification Number (TIN)				
backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.				Or	
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.		Employer Id	dentification number		
Part	I Certification			·	
Under	penalties of perjury, I certify that:				
1. The	number shown on this form is my correct taxpayer identification number (or I am waiting	ig for a num	ber to be is:	sued to me), and	
Re	n not subject to backup withholding because: (a) I am exempt from backup withholding, renue Service (IRS) that I am subject to backup withholding as a result of a failure to rep fied me that I am no longer subject to backup withholding, and				
3. Ia	n a U.S. citizen or other U.S. person (defined below).				
withhol For mo arrange	eation instructions. You must cross out item 2 above if you have been notified by the II ding because you have failed to report all interest and dividends on your tax return. For rtgage interest paid, acquisition or abandonment of secured property, cancellation of dement (IRA), and generally, payments other than interest and dividends, you are not requivour correct TIN. See the instructions on page 4.	real estate t	ransactions,	, item 2 does not apply. ndividual retirement	
Sign Here	Signature of	Date ▶			

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States.
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

• The U.S. owner of a disregarded entity and not the entity,