

# 4th Annual FUMC 5@5 Saturday, September 7th

First and Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Athlete's and Volunteer Release: Please read, sign, and date.

I know running and volunteering to work in races are potentially hazardous activities. I should not enter and run in the 5@5 or 1 mile kids run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running and/or volunteering to work in the aforementioned race, including but not limited to falls, contact with other participants, the effects of weather, including high heat or humidity, ice and snow, the condition of the road and traffic on the course with all such risks being known and agreed by me. Having read this waiver and knowing these facts, and in the consideration of the acceptance of my application, I for myself, and anyone entitled to action on my behalf, waive and release First United Methodist Church of Jefferson City or any and all members thereof, and all further sponsors, their representatives, successors, from all claims or liability of any kind in carrying out my participation in the aforementioned event though that liability may arise out of negligence or carelessness on the part of the person's/organization named in this waiver. I also grant permission to all the foregoing to use any photograph, motion picture, recording, or any other record of this event for any legitimate purpose. Due to insurance regulations, strollers, roller blades, bicycles, pets, and headphones are not permitted on the 5k race course.

Signature

Date

Parent's Signature(if under 18)

Date