



**Registration Form  
(One per Participant)**

**CASH or CHECK ONLY!!!**  
Checks payable to 'Scholarship and Grant Fund'

BIB # \_\_\_\_\_

I am registering for (please indicate below course and age group):

Course	Age Group	Fee	Total
5K	Adult (18+ years)	\$30	
	Youth (17 & under)	\$20	
	District 25 Staff	\$25	
1 Mile	Adult (18+ years)	\$30	
	Youth (17 & under)	\$20	
	District 25 Staff	\$25	
Timing in 2 races	Any Age	\$10	
	<b>Grand Total Due</b>		

**WAIVER AND RELEASE:** I represent and warrant that I am at least 18 years old and that I have the full authority to register, and to give this waiver, release, and consent on behalf of, all participants being registered by me. I acknowledge and agree that: there are risks of injury and damage in any physical fitness activity, including this run/ walk; everyone is responsible for obtaining their personal physician's approval to participate in this run/walk or that of their child or ward; and, each participant participates in this run/walk at their own risk and assumes all risks, known and unknown, of physical injury, property damage, and loss in connection with this run/walk event. In consideration of acceptance of this entry form and the opportunity to participate, I hereby fully and forever waive any and all claims against the event organizers, their sponsors, and each of their employees, volunteers, and other representatives ("Released Parties"). Further, I hereby release and hold harmless the Released Parties from and against any and all injuries, damages, and losses sustained by me or any other participant registered by my submission of this entry form. I irrevocably consent to the use by the Released Parties of my image, likeness, and statements, in whole and in part, in photographs, videos, and other media for the purposes of promotion and advertising of this run/walk and future events.

Name \_\_\_\_\_

Age \_\_\_\_\_ M or F

Email \_\_\_\_\_

*This participant is affiliated with the following school  
(student, staff, or family member) – Circle ONE*

**Dryden Greenbrier Ivy Hill Olive Patton South Thomas Westgate Windsor**

Signature \_\_\_\_\_  
(Parent/Guardian for those under 18) \_\_\_\_\_ Date \_\_\_\_\_

EMERGENCY CONTACT Name \_\_\_\_\_

EMERGENCY Contact Phone \_\_\_\_\_