

5k Run/Walk Saturday, August 25th, 2012 Bethel, Vermont

Registration Form Street Address: _____City/State/Zip:_____ Email: Phone #: Gender: __Male __Female Age: _____ Date of Birth: ___/___/ 5K Run/Walk Entry Fees: Adults: _____\$20 Under 18: ____\$ 12 1 mile fun/run walk: donation amount is your choice _____ (If you want a tshirt, suggested donation is at least \$12) T Shirt size preference: Circle: Adult Youth S M L XL *Cash or Check only, no credit cards, please. Total Amount Enclosed: Race starts & finishes at the Bethel/Whitcomb School. Registration starts at 9 am race at 10 am. I know that running and walking a race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I assume all risks with my voluntary participation in this event, including but not limited to falls, contact with other participants, the effects of the weather, inlouding extreme temperatures, traffic, and all conditions of the road, all such risks being known and appreciated by me. Knowing these facts and in consideration of your accepting my entry, I for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue and waive, release, any and all right and claims for damages or injuries that I may have against the Bethel Flood 5K Event Director, RunSignUp.com, Town of Bethel, VT, Bethel Schools, and all of their agents assisting with the event, sponsors and their representatives and employees for any and all injuries to me or my personal property. This release includes for any and all claims or liability, whether forseen or unforseen, for death, all injuries and/or damages suffered by me before, during or after this event. I recognize, intend and understand that this release is binding on myself, my heirs, executors, administrators, or assignees. I further grant full permission to the above mentioned sponsors, organizers, and/or agents authorized by them to use any photographs, videotapes, motion pictures, recordings or other record of the event for any reasonable purpose. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed Medical Doctor. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above waiver. Signature _____ Date: ____

> Please return this form with payment to: Bethel Elementary School Attn: Bethel 5K 273 Pleasant Street, Bethel, VT 05032