

2018 RUN FOR THE RIBBON RUN/WALK REGISTRATON

PLEASE PRINT CLEARLY!

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

EMAIL: _____ TEAM: _____

RACE INFORMATION

Sex: M or F Date of Birth: _____ Age on June 17, 2018: _____

T-Shirt Size (Circle One):

Adult Sizes (S) (M) (L) (XL) (XXL) Children's Size (S)

Category (circle one) 5K WALKER 5K RUNNER 1 MILE WALK DOZE FOR DADS

Early Bird Entry Fees: (Non-Refundable)

Early Bird Rate valid until May 17, 2018

14 and Up \$30

Ages 3-13 \$20

2 year old and under \$0

Doze for Dads \$25

Contribution of \$ _____.

Entry Fees: (Non-Refundable)

Pre-Registration Ends June 15, 2018

14 and Up \$35

Ages 3-13 \$25

2 year old and under \$0

Doze for Dads \$25

Contribution of \$ _____.

Prostate Cancer Celebration Sign: \$10 each

Purchase a Prostate Cancer Celebration Sign to honor a loved one that will appear along the race course.

Sign deadline: Sunday, June 10, 2018. Quantity: _____

Name(s): _____

Total Registration and Purchases: \$ _____

PAYMENT INFORMATION

_____ Check enclosed. Please make checks payable to **MIU Men's Health Foundation**.

_____ Credit Card: Visa MasterCard AMEX

Card Number: _____

EXP: _____ SVV: _____ Name: _____

Signature: _____

Please return this form and check to:

MIU Men's Health Foundation | 20952 Twelve Mile, Suite 200 | St. Clair Shores, MI 48081

Email: info@miumenshealthfoundation.org | Kristin Denno | kdenno@jrturnbull.com | 248-255-6651

MIU MEN'S HEALTH FOUNDATION

EVENT WAIVER

Run for the Ribbon Waiver 2017 AGREEMENT: I wish to participate in the 2018 Run for the Ribbon on June 17, 2018 and/or its affiliated activities, fundraising and events (collectively, the "Event"). I understand that all donations made in connection with the Event are non-refundable and non-transferable, irrespective of my participation in the Event. I also understand that any and all registration fees are non-refundable, non-transferable and not tax deductible.

WAIVER AND RELEASE: I understand that my consent to this Waiver and Release is given in consideration for being allowed to participate in the Event. I hereby covenant that I am in good physical condition and am solely responsible for my personal health, safety and personal property. I understand that it is recommended that I discuss my participation in the Event with my primary care physician. I understand that the Event is a potentially hazardous activity and I hereby assume, voluntarily, full and complete responsibility for any injury, accident, or loss that may occur during my participation in the Event or while on Event premises or during any fundraising activities associated with the Event. I understand that during my participation in the Event, I will be on public streets and facilities where hazardous conditions exist, and I am aware and appreciate the risks that may result. I am also aware that accidents may occur during my participation in the Event that could result in serious injury or death. I agree that my participation in the Event is voluntary with knowledge of all risks. I, for myself, my heirs and next of kin, administrators and executors, hereby unconditionally and irrevocably release and hold harmless, and covenant not to file suit against MIU – Run for the Ribbon, MIU – Men's Health Foundation, Fight Like A Man – International, Michigan Institute of Urology, P.C., the City of Royal Oak, the City of Huntington Woods, the Detroit Zoo, any and all Event sponsors, organizers, volunteers, officials and their respective parents, subsidiaries, successors, assigns, affiliates, suppliers, licensees, and the respective directors, officers, employees, shareholders and agents of same and all other persons or entities associated with the Event (collectively, "Released Parties") for any and all injuries, damages, or losses which I, my minor child(ren), and/or representatives may sustain while participating in or attending, in any way, the Event or while on Event premises, or during any fundraising activities associated with the Event, or which may hereafter accrue to me, my minor child(ren) and/or representatives, regardless of the form or action or basis of the claim, whether in contract or tort (including strict liability and sole negligence or carelessness of the Released Parties). I understand that I am responsible for any and all medical coverage for myself, my minor child(ren), and/or representatives throughout the duration of the Event. I acknowledge that I am solely responsible for my personal health and safety, and the personal property I may bring with me in connection with my participation in the Event. I further understand that I can be removed and/or eliminated from the Event should I fail to comply with all rules and directions of the Event. In the event of injury, accident or illness during my participation in the Event, I consent to receive, and authorized Event organizers, officials, participants, volunteers, and spectators to use their discretion to administer first aid, medical care and/or medical treatment.

PHOTOGRAPHIC, IMAGE AND RESULTS RELEASE: I further give my full consent and permission to the Released Parties, the irrevocable right to use, for any purposes whatsoever and without any compensation, any photographs, videotapes, audiotapes and/or other recordings of me, my minor child(ren) and/or representatives that are made during the course of the Event and the results of my or my minor child(ren)'s participation in the Event, including my name, image, name of my child(ren) and/or image of my child(ren). I hereby release the Released Parties from any liability, damages or claims resulting from the use of my image or the image of my child(ren), including, but not limited to, claims of libel or invasion of privacy. This Agreement, Waiver and Release, and Photographic, Image and Results Release shall be construed under the laws of the State of Michigan. In the event any provision of this Agreement, Waiver and Release, and Photographic, Image and Results Release shall be deemed unenforceable by law, the Released Parties shall have the right to modify such provision(s) to the extent necessary to be deemed enforceable and all other provisions shall remain in full force and effect. I understand that I have given up substantial rights by signing this Agreement, Waiver and Release, and Photographic, Image and Results Release, and have done so voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of liability to the greatest extent permitted by law.

Signature: _____

Name: _____ Date: _____

For participating children under the age of 18, the parent or guardian must sign on the child's behalf.