

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Chester County Girls on the Run 5K YMCA STRIDE 5K Challenge

Name:	
Email:	
DOB:	Circle: Male or Female
Address:	
City:	Zip Code:
Waiver:	
In consideration of your permitting me to participal executors, administrators, successors and assigns claims for damages which I may have against you event occurs, or anyone connected with the event successors, and assigns, for any and all injuries of taking part in the event. I grant my permission to for any lawful purpose.	, I hereby waive and release all rights and or your assigns, the municipalities in which the their heirs, executors, administrators, rillnesses which I may suffer as a result of
Signature:	Date:
	BIB NUMBER: (to be completed at registration)

YMCA OF GREATER BRANDYWINE www.ymcagbw.org