

When: Saturday, August 19, 2017, 10:30 a.m., Rain or Shine. Registration opens at 9:30 a.m.

Where: Delaware State Fair Grounds - Quillen Arena, 18500 S. DuPont Hwy, Harrington, Delaware 19952

Course: Course length is approximately 2 miles and has 10 obstacles.

<u>Registration</u>: \$40 until August 4th, \$50 after and on event day. <u>Must be 16 or older to participate</u>. Make checks to Delaware Farm Bureau Foundation and mail to TriSports Events, 2772 Hazlettville Rd, Dover, DE 19904. Questions? Contact Laura Simpson at laura.simpson@defb.org. Day of event registration will be available. Register online at <u>TriSportsEvents.com</u>. Online registration will close at 6 P.M. on Aug 17.

<u>**Teams:**</u> A team must consist of 3 members and all 3 members must complete the course to qualify for an award. Team members will also eligible to receive individual (overall, age group) awards.

Silent Hero: Can't make this event but would still like to show your support? Register as a Silent Hero!

<u>Wave Start:</u> Wave starts will be utilized for this event. How many waves and how many participants per wave will be determined based off of the total number of entries. The final determination will be announced the morning of the event.

<u>Awards:</u> iPad Minis for 1st Male & 1st Female, \$500 College Scholarship for 1st Full-Time College Student, Custom awards for overall male, female and master's winners. Top 3 male & female runners in 10 year age groups up to 60 & over. Three deep team awards for all male, all female, and coed teams.

<u>Amenities:</u> Quality 5K <u>Performance Tech Shirts</u> to all registered participants. <u>Results/photos will be</u> <u>posted at TriSportsEvents.Com.</u> Awards ceremony, LIVE music & post race party will take place at Quillen Arena.

Benefits: Delaware Farm Bureau Foundation aims to build awareness, understanding & positive public perception about Delaware's farm operations and fresh local food; grant scholarships and feed the hungry.

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Age Day of R	ace	Sex:]	M F	T-shirt Size:	S M L	XL XXL
Print Name:_						
Address:						
	(Street or P.O. Box)		City	State		Zip
Phone: ()	Emai	il:			
Circle One:	<u>Individua</u> l	<u>Male Team</u>	Ī	<u>Female Team</u> <u>Co</u>	oed Team	<u>Silent Hero</u> (donation)
Team Name_						

This is a TriSports Events Chipped Timed Event

RELEASE OF LIABILITY READ CAREFULLY - THIS AFFECTS YOUR LEGAL RIGHTS

In exchange for participation in the Mad Bull Mud Run taking place on August 19, 2017 and organized by the Delaware Farm Bureau Foundation (DEFBF), of 3457 S. DuPont Hwy., Camden, DE 19934, I agree for myself and (if applicable) for the members of my family, to the following:

I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by "DEFBF", or the employees, representatives or agents of "DEFBF".

I recognize that there are certain inherent risks associated with the Mad Bull Mud Run and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge the DFBF, TriSports Events Management, The Harrington State Fair, and any sponsors of this event and those organizations contributing to this race to include their affiliates, agents, employees, officers, directors, their representatives and successors for any acts of negligence on the part of the parties to be indemnified, their employees and agents for injury, loss or damage arising out of my or my family's use of or presence upon the facilities at the Harrington State Fairgrounds, whether caused by the fault of myself, my family, or in part by DEFBF or other third parties.

I agree to indemnify and defend The DEFBF, TriSports Events Management and Harrington State Fairgrounds, and any sponsors of this event and those organizations contributing to this race to include their affiliates, agents, employees, officers, directors, their representatives and successors against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities located at the Delaware State Fairgrounds, Harrington, DE 19952.

I agree to pay for all damages to the facilities located at the Delaware State Fairgrounds, Harrington, DE 19952 caused by me or my family's negligent, reckless, or willful actions.

(If participant is a minor under 18) I consent to the participation of my_____, ____, of (address) in the Mad Bull Mud Run and agree on behalf of the above minor to all of the terms and conditions of this Agreement. By signing this Release of Liability, I represent that I have legal authority over and custody of

6. In the event of an injury to myself or to the above minor during the above described activities, I give my permission to DEFBF or to the employees, representatives or agents of DEFBF to arrange for all necessary medical treatment for which I shall be financially responsible. This temporary authority will begin on August 19, 2017 and will remain in effect until terminated in writing by the undersigned or August 20, 2017, whichever occurs first. DEFBF shall have the following powers:

a. The power to seek appropriate medical treatment or attention on my behalf or on behalf of my child as may be required by the circumstances, including without limitation, that of a licensed medical physician and/or a hospital;

b.The power to authorize medical treatment or medical procedures in an emergency situation; and

c. The power to make appropriate decisions regarding clothing, bodily nourishment and shelter.

. . .

7. Any legal or equitable claim that may arise from participation in the above shall be resolved under Delaware law.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

*I hereby give my permission to the event organizers and sponsors to use my name and/or picture in any publication, broadcast, telecast or other account of this event without limitation or obligation of further compensation thereof.

Entry fees are non-refundable or transferable.

Dated:	
	Emergency Contact Info:
Signature:	
Name:	Relationship:
Address:	
Phone 1:	Phone 2: