

# DOW BAY AREA FAMILY YMCA

## *RISE 'N SHINE SUMMER 5K WALK & RUN*

**Saturday, August 11, 2017 @ 8:00 a.m.**

Dow Bay Area Family YMCA 225 Washington Ave Bay City, MI 48708

**Run Age Groups** 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, and 60 & Over  
**Walk Age Groups** 14 & under, 15-19, 20-29, 30-39, 40-49, 50-59, and 60 & Over  
**Awards 5K Walk & Run Overall** 1st and 2nd place each age group (Run only), both male AND female  
**1st, 2nd, and 3rd overall for Walk AND Run, both male AND female**  
**Race Day Entry Fees** Rise 'N Shine 5K Walk / Run — \$35  
Little Rays of Sun 1K—\$25  
Kids TRI 'n shine—\$30  
Shirts not guaranteed to anyone entering after August 1, 2018.

**Bib #**

**Information** (989) 895-8596 or jjamrog@ymcabaycity.org or www.ymcabaycity.org

**Event entered** RNS 5K Run \_\_\_\_\_ RNS 5K Walk \_\_\_\_\_ LROS 1K \_\_\_\_\_

**Kids TRI** \_\_\_\_\_ ☐ Open ☐ Age Division

**Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **M.I.** \_\_\_\_\_

**Birth Date** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Age on Race Day** \_\_\_\_\_ **Sex** M \_\_\_\_\_ F \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** (\_\_\_\_) \_\_\_\_\_

**Shirt Size (circle):** S M L XL 2XL(add \$3) 3XL(add \$5)

**Payment Method:** ☐ Cash ☐ Check ☐ Credit Card (If selected, fill out information below)

**Type of card:** \_\_\_\_\_

**Name on card:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_/\_\_\_\_

**Security Code:** \_\_\_\_\_

**TOTAL PAID TODAY:** \$ \_\_\_\_\_

**SEE REVERSE SIDE FOR WAIVER INFORMATION AND SIGNATURE**

# DOW BAY AREA FAMILY YMCA

## *RISE 'N SHINE SUMMER 5K WALK & RUN*

### WAIVER

In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director, RunSignUp.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. 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 a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization. I hereby declare for myself and any entities who may act on my behalf, waive and release the Dow Bay Area Family YMCA, The City of Bay City, and any other parties involved with the race or Family Fun Fest from all claims or liabilities of any kind arising out of my participation in this event.

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 release and waiver.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

**SIGNATURE REQUIRED (PARENT SIGNATURE IF PARTICIPANT IS A MINOR)**

**DATE**

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