

Name:

## WEST SHAMOKIN "RUN THE SWAMP" 5K

## May 12, 2018 @ 9:00AM Rain or Shine

WSHS Student: Yes\_\_\_\_ No \_\_\_\_

	(1 11116)					
Team: None	Boys BB	Girls BB _	Soccer	_ Girls VB	Во	ys VB
Softball	_ Baseball	_ Football Gol	fCheerleadir	ng (Teams	cannot re	gister online)
Other Team Members:		,	,	,		
Address:			State:	:	Zip:	
Telephone: (	)	Male	Female	Age Da	ay of Rad	се
Student (17 WSHS Stu After April 2 Optional R	7 and under, ware dent Discount ( 20 & Race Day ace Shirt (Only	cch Shirt)	\$1: \$1: no shirt)\$2 ranteed)\$1:	5.00 Regi: 0.00 Opti 5.00 0.00 <b>Tota</b>	onal Shirt	. \$ :\$ \$ arsity Club"
ers in these categories	: 11 and under, 12 S sports team will ole for runners.	p 3 female finishers will 2-15, 16-19, 20-29, 30-3 also receive a medal ( <u>5</u>	9, 40-49, 50-59, 60+.	No Duplicate	Awards. <sup>-</sup>	•
		asd.k12.p.us or by mail a				
Waiver: I know that runnin ter and participate unless I a in good health, and I am procluding the right of any offic to abide by them. I assume of the weather, including his read this waiver and knowir and release the Armstrong sclaims or liabilities of any kin part of the persons named i record of this event for any	g [volunteering for] a am medically able and operly trained. I agree cial to deny or suspended all risks associated wing heat and/or humiding these facts and inconscious of my point this waiver. I grant legitimate purpose. I	cross country race is potential properly trained, and by my to abide by any decision of a dry participation for any registry traffic and the condition consideration of your accepting test Shamokin JrSr, High Schwarticipation in this event, every permission to all of the foregunderstand that this event of	ally a hazardous activity, was signature, I certify that I as a race official relative to an ason whatsoever. I attest to uding but not limited to: fast of the road, all such risks agomy entry, I, for myself a mool, all event sponsors, then though that liability magoing to use my photographoes not provide for refundance.	which could cause am medically able by aspect of my postal have read to alls, contact with being known and anyone entitle ir representatively arise out of new ohs, motion pictures in the event of the county of th	e injury or de le to perform participation the rules of to nother partice and appreciated led to act on wes and succe gligence or coures, recording of a cancellation	eath. I will not en- in this event, and a in this event, in- the race and agree cipants, the effect ed by me. Having my behalf, waive essors from all carelessness on the ngs or any other ion, and by signin
rarπcipant Signature	):			Date:	/	
Parent Signature (If u	nder 18):			Date:	/	_/
Online Re	gistration @ ht	tps://runsignup.com/R	ace/PA/RuralValley	/WSHSRunt	theSwam	p5K