

WHEELING JESUIT UNIVERSITY
LET'S GET PHYSICAL

5K

Run/Walk

Fun for the whole family!

Saturday, November 10th, 2018

Hosted by: WJU Physical Therapy Club



REGISTRATION FORM

Date: November 10th, 2018

Time: 5k walk/run – 8:45am
1 mile walk/run – 8:15am
Kid's run – 8:05am

Where: Alma Grace McDonough Center
316 Washington Ave
Wheeling, WV 26003

Course: Challenging course through WJU's campus with hills and cross country portions included.

Register: Online at: <http://www.runsignup.com/letsgetphysical5k>
OR
Mail this form in by November 3rd, 2018

Pricing:

General Public	\$30
WJU Student/Staff	\$25
Veteran	Free
Family of Veteran	\$15
1 mile walk/run	\$10
Kid's run	\$5

**** All pricing (except kid's/veterans) will increase by \$5 on November 9th, 2018 at 12:00am ****

All proceeds support WJU's Physical Therapy Club, community outreach projects, and Service Learning Trips.

Packets may be picked up Friday November 9th from 6-8pm or Saturday morning from 6:15-7:45am

Name:_____ Age:_____ DOB(mm/dd/yyyy):_____
Gender:___ Address:_____ City:_____ State:___ Zip:_____

Select one:

General Public ☐ WJU Student/Staff ☐ Veteran ☐
Family of Veteran ☐ 1 mile walk/run ☐ Kid's run ☐

Type: Run ☐ Walk ☐

T-shirt: Small ☐ Medium ☐ Large ☐ X-Large ☐ 2X-Large ☐

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, Wheeling Jesuit University, 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/trail 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.

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:_____ Date:_____

Parent signature (under 18):_____ Date:_____

Mail to:

Wheeling Jesuit University 5k Race Registration
Alison Kreger, PT Department
316 Washington Ave
Wheeling, WV 26003

Checks made payable to:

WJU PT Club