

HERITAGE DAYS 5K WALK/RUN

MAKE READING YOUR HERITAGE

2011 Registration Form

One form for each participant; \$20 fee, or \$10 if under age 13
Make checks payable to Garden City Library
Mail to Garden City Library, PO Box 348, Garden City UT 84028
If questions, call 435-946-2950 or 435-757-9747

Name: _____

Address: _____

Date of Birth: _____ Age: _____ Gender: M F

Adult Shirt Size: S M L XL 2X (add'l \$2)

Child Shirt Size: S M L

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact: _____

You Must Sign This Waiver

The Heritage Days 5k Walk/Run is an activity that may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic and conditions of the road/path. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including personal injury and death, arising in any way out of my participation in this event.

It is my responsibility to dress appropriately. Although route maps, rest stops, refreshments, and other assistance may be made available during this event, I am solely responsible for my own health and safety. I represent and warrant that I am physically fit and able to participate in this event and I agree to stop and request assistance if I experience any symptoms such as, but not limited to, dizziness, excessive fatigue, shortness of breath, pain or any other conditions which would make it difficult or unsafe to continue.

I agree, for myself, my heirs, executors and administrators, to not sue and to release, indemnify and hold harmless, the town of Garden City, its affiliates, officers, directors, volunteers and employees, and all sponsoring businesses and organizations and their agents and employees, from any and all liability, claims, demands and causes of action whatsoever, arising out of my participation in this event and related activities – whether it results from the negligence of any of the above or from any other cause.

This release and indemnification agreement shall be as broad and inclusive as is permitted by the State of Utah. If any portion of it is held invalid, the balance shall continue in full force and effect.

I have read, understand and agree to the terms of this Agreement.

If Participant is a minor, the parent or guardian must agree to the below:

I am the legal guardian of Participant, and I hereby consent to his/her participation. I have read the foregoing release and indemnification agreement, and I hereby agree on behalf of myself and Participant to its terms.

Name of Participant (Please Print)

Date

Signature of Participant and/or Parent or Guardian

Date