

Registration Form



THIS FORM MUST BE COMPLETE AND LEGIBLE IN ORDER TO GET CREDIT FOR YOUR SCHOOL

Name: _____
(Last) (First) (MI)

Age: _____ Sex: M F Phone: _____

Address: _____
(Street) (City) (Zip)

Email: _____
(To be notified of winning schools and future events)

School to credit for your participation: _____ School District: _____
(Do not abbreviate)

I am a: Student Parent Teacher/Admin. Other: _____ Emergency Contact: _____
(Circle One) (Name & Phone #)

PARTICIPANT WAIVER: Read carefully. In consideration for the acceptance of my entry (or the entry of my minor child), I the undersigned, intending to be legally bound for myself (and my minor child if applicable), my executors, administrators, and assignees, do hereby waive and release "Lefty's Family Fun Day & 5K," the event venue (their parent and affiliated companies), event city, all sponsors of this event including any free health screenings I receive, and all persons and agencies connected to the event from all claims of damages arising from my (or my minor child's) participation in and travel to and from this event. I also certify that I (and/or my minor child) am physically fit and adequately trained to participate in this event. Further, I hereby grant full permission to any of the foregoing to use photographs, videotapes, motion pictures, readings, or any other records of this event for any legitimate purpose. If participant is less than 18 years of age a parent or legal guardian must sign this form.

Signature of Participant (Must be over 18): _____ Date: _____

Signature of Legal Guardian/
Relationship of Minor Participant: _____ Relationship to Minor: _____

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