Ē	N/WALK	REGIS	RIDAY, JULY 3 <sup>RD</sup> © 7:00 AN Iowa Valley High School 359 E. Hilton St. Marengo, IA 52301 ter and pick up shirts from 6:00-6:45 am on the day of the race
Name:			DLLOWING FOR EACH PARTICIPANT
NAME:			PHONE:
Address:			CITY, STATE, ZIP:
	Circle one ADUL		-SHIRT SIZE : <b>S M L XL 2XL 3XL</b>
AGE GRNV 8 <sup>th</sup> grade and under 9 <sup>th</sup> – 12 <sup>th</sup> grade 19 – 29 30 – 39 40 – 49 50 – 59	MALE F	EMALE	[¥[Ν] Circle one 5κ RUN or 5κ WALK
60 and up		(Check made pay Adu	ENTRY FEES: vable to Iowa Valley Schools) It Entries: \$25 ent Entries: \$15
***ALL			D BY JUNE 24 <sup>TH</sup> TO BE GUARANTEED A SHIRT*** y of, but a t-shirt will not be guaranteed)
	MAIL COMPL	_ETED FORM, R	ACE FEES, AND SIGNED WAIVER TO:   359 E. Hilton St.   Marengo, IA 52301

Kari Schumacher | 319.361.5611 | karilkw76@gmail.com

ALL PARTICIPANTS MUST HAVE A SIGNED WAIVER BEFORE RACE BEGINS. ONE FORM IS NEEDED FOR EACH PARTICIPANT.

\*\*THE FOLLOWING WAIVER MUST BE SIGNED BE EACH PARTICIPANT:

I know that running/walking is a very strenuous and potentially hazardous activity. I realize that I should not enter and participate unless I am medically able and properly trained. Knowing this, I certify that to the best of my knowledge, I am in excellent physical condition and have no medical condition that could likely worsen by participation in the event. Furthermore, I certify that I have trained properly for this event and agree to abide by any decision made by a race official concerning my participation in the event.

I am fully aware and assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, the effect of weather, including extreme cold or heat, humidity, wind, snow, rain, ice or conditions on the road, and I appreciate and assume all risks associated with the presence of vehicular traffic on the race course. I am also fully aware that I am solely responsible for my own safety while traveling to and from all events associated with the Iowa Valley Fine Arts Boosters 5K.

In addition, I fully understand that the wearing of headphones while participating in this event could be potentially hazardous to my safety. I further understand that the sponsoring organizations and entities have recommended against the wearing of headphones while participating in this event.

Having read this waiver and knowing these facts and in consideration of you accepting my entry, I for myself and anyone entitled to act in my behalf, waive and release the Iowa Valley Community School District, the cities in which the race is conducted, the race coordinators, all sponsors, race officials, volunteers, their representatives, successors, or assignees for any and all claims or liability for death or damages, for all injuries to me or my property arising out of or in connections with this event, including without limitation, claims or liabilities resulting from those matters described in the preceding paragraphs. This waiver extends to all claims of any kind or nature, whether foreseen or unforeseen, known or unknown. Furthermore, I grant permission to all foregoing organizations and entities to us any photographs, motions pictures, recordings or any other record of this event for legitimate purposes. In addition, my signature below verifies that I have read and agree to the terms stated above. A facsimile of my signature is a valid signature for this waiver. I understand that the entry fees are non-refundable.

Signature:

(Parent or guardian's signature is required for participants under the age of 18)