



OFFICIAL REGISTRATION FORM

“Spring Has Sprung” Healthy Families 5K Run/Walk 9:00 a.m., March 17, 2012

Presented by the Greene County Healthy Lifestyles Coalition

MARCH 17, 2012

Only ONE entry per form; please print legibly. Duplicate as necessary.

Participants are encouraged to register before March 09, 2012; additional \$5.00 fee for registrations postmarked after March 09, 2012 and ALL same day registrations.

Last Name: _____ First Name: _____ Sex: M F

Home Address: _____

City, State, Zip: _____

Phone Number: () _____ Cell Phone: _____

Team Name (school or business, if applicable): _____

Shirt size (guaranteed if registered by 3/09/12): YS YM YL S M L XL XXL

Email Address: _____

Emergency Contact Name & Phone Number: _____

AGE DIVISION (check your age as of 3/17/12):

6-7 8-9 10-11 12-13 14-15 16-17
 18-19 20-29 30-39 40-49 50-59 60-69
 70-79 80+

CALCULATE YOUR FEES:

\$15.00 Postmarked by March 09, 2012 \$ _____ Amount Enclosed

\$20.00 After 3/09/12 or Day of Race *ALL FEES ARE FINAL – NO REFUNDS*

SPECIAL DISCOUNTS FOR GROUPS/TEAMS OF 10 OR MORE...Call for more info!

Please make checks payable to: GCCHD

Mail check and form to:

GCCHD SHS 5K

360 Wilson Drive, Xenia, OH 45385

REGISTER ONLINE...IT'S EASY!

www.active.com

SIGN THE WAIVER:

RELEASE OF LIABILITY - READ BEFORE SIGNING. In consideration of being allowed to participate in any way in the Greene County Combined Health District's SHS5K, its related events and activities, I, the undersigned, acknowledge, appreciate and agree that: 1. the risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce this risk, the risk of serious injury does exist; and, 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and 3. I willingly agree to comply with the state and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the organization immediately; and 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE GREENE COUNTY COMBINED HEALTH DISTRICT, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, partners, advertisers, and, if applicable, owners and lessors of premise used for the activity ("releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I understand that bicycles, skateboards, roller skates or blades are not allowed in the race and I will abide by this guideline. Use of headsets is strongly discouraged.

I also grant permission to the Spring Has Sprung 5K and its sponsors to use and photographs, motion pictures, recordings or any record of my participation in the Spring Has Sprung 5K for legitimate purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDING ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Print Name

Signature

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the releasees, and, for myself, my child and our heirs, assigns and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Print Name

Signature

—PLEASE SIGN THE WAIVER ON THE BACK OF THIS ENTRY FORM—