**5k Run/Walk**

**Benefitting**



***Presented by Chi Omega at the University of Central Florida***

***UCF Reflection Pond***

***Saturday February 8th, 2014***

***8am Registration***

***9am Start of Race***

***Registration***

***$20 before February 8th 2014***

***$25 Day of Event***

**Registration Form**

Name (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Male:  Female: 

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: (If Applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-shirt Size (please circle): S M L XL

Completed Waiver? Yes No

Were you referred by a Chi Omega? Yes No

If so, which sister? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Safety Waiver**

I know that running a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I assume all risks associated with participating in this event including, but not limited to: falls, contact with other participants, the effects of the weather, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry to participate in the Race Love Wish 5K to be held on February 8th, 2014 in Orlando, Florida. I, intending to be legally bound, do hereby for myself, my heirs, my executors and administrators agree as follows:

1. I do waive and forever release any and all rights and claims for any damages and liabilities of any kind arising out of my participation in the Event against all persons, entities and agencies involved with promoting and holding the Event, including but not limited to all sponsors, volunteers and vendors of the event, their agents, successors, representatives and assigns even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

2. I assume the risk of all bodily injuries, including death, resulting there from, and personal injuries to me and damage to and loss of my property, including loss of use thereof and any other indirect or consequential damages, resulting directly or indirectly, wholly or in part, from my participation in the Event and while traveling to and from the Event.

3. I hereby agree, for myself and/or for a minor under the age of eighteen for whom I am signing, to indemnify, defend, and hold the entities named above harmless from and against any and all claims, liabilities, losses and damages, costs, expenses (including attorney’s fees) judgments and penalties arising out of any of my, and or said minors, acts or omissions to act:

4. I understand that the Event reserves the right to use any and all participant’s names and/or likeness with regard to promotional and/or advertising materials.

5. I understand that all entry fees are non-refundable.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Participant Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent of Participant under the age of 18

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date

NOTE: Separate entry forms and signed waivers must be completed for each participant.