

Giving Hands 5K Starfish Strut/ 1 Mile FUNdraiser Run & Festival
Sat, June 1, 2013

Race Waiver

I know that participating in a 5K run/walk or fun run is a potentially hazardous activity. I will not enter and participate unless I am medically able and properly trained. I assume all risks from participating in this event and its related activities including, but not limited to: falls; contact with other participants; effects of the weather, including high heat, humidity, precipitation, traffic and the conditions of the road/trail; all such risks being known and appreciated by me. Having read this waiver and release and knowing these facts and in consideration of your accepting my entry fee and participation, I, for myself and anyone entitled to act on my behalf, waive and release Giving Hands, Inc, City of Hoover, City of Hoover Parks and Recreation, race officials, volunteers, sponsors and their respective affiliates, subsidiaries, principals, directors, agents, officers, employees or contractors of and from all claims, liabilities or causes of action of any kind arising out of my participation in this event or its related activities which I or my successors, assigns or heirs may ever have now or in the future against any of them. This release and waiver extends to all claims of every kind and nature whatsoever. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any lawful purpose. Applications for minors will be accepted only with a parent's signature and all children participating in the 5K race under the age of 15 must be accompanied by an adult during the entire race.

_____ REGISTRATION FOR 5K RACE: RUNNER OR WALKER - \$30.00 Cash / Check / Online

_____ REGISTRATION FOR 1 MILE FUN RUNNER OR WALKER - \$15.00 Cash/ Check/ Online

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (____) _____ Date of Birth _____

Email _____ T-Shirt Size _____

Race (circle one): RUN WALK MALE FEMALE Age on Race Day _____

Waiver Signature: _____

(signature of parent or guardian if under 19)

This application may be photocopied if necessary.

PLEASE MAKE ALL CHECKS PAYABLE TO: **Giving Hands, Inc.**

MAIL TO: Giving Hands, Inc.
3679 Cahaba Beach Road
Birmingham, AL 35242

FOR MORE INFORMATION: (205) 937-7463 or EMAIL: wendy@givinghandsandhope.org
www.givinghandsandhope.org