

SHEBOYGAN FALLS

# FLYING FALCONS 5K COLOR RUN

Saturday, May 20<sup>th</sup>, 2017

SF High School Campus

(220 Amherst Ave, Sheboygan Falls)



Registration: 2:00pm

Start Time: 3:00pm

-----Return Bottom Portion-----

## Registration Form

All paid registrations include a free color packet. Colors may vary.

Early Bird Promotion: Registration forms returned on or BEFORE April 20<sup>th</sup> will include a free event t-shirt for each PAID registrant!!


Participant's First/Last Name	Registration Fee:	Under 4yrs FREE	Child 4-13 \$15	Child 14-18 \$15	Adult \$15

We will have 4 starting waves: 1- Runners, 2-Joggers, 3- walkers, 4- families with strollers/wagons

Requested Wave: \_\_\_\_\_

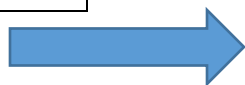
Total Registration Costs: \$\_\_\_\_\_

### Optional Add-Ons:

<p><b>Additional Color Packets</b> \$2/Package</p>  <p>Number of extra packs: _____ Extra Packets x \$2: _____</p>	<p>T-Shirt sizes are not guaranteed after 4/30</p> <p><b>T-shirts</b> \$10</p> <p>_____ Youth S      _____ Adult S _____ Youth M      _____ Adult M _____ Youth L      _____ Adult L _____ Adult XL _____ Adult 2XL _____ Adult 3XL</p> <p>Number of T-Shirts x \$10: _____</p>	<p>Return form to any SF school office</p> <p><b>Registration Total:</b> _____ <b>Extra Packets x \$2:</b> _____ <b>T-Shirts x \$10:</b> _____</p> <p><b>Total Amount Due:</b></p> <p>\$ _____</p> <p>Checks made payable to: <b>Falcon Families of SFES</b></p>
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Rain Date: June 3rd, 2017

Registration Fee is non-refundable



Any Questions or Concerns can be directed to:

Roberta Lentz

falconfamiliesofsfs@gmail.com

Waiver and Release of Liability for Participants In consideration of being permitted to participate in the School District of Sheboygan Falls' "Flying Falcon 5K Color Run", I agree to assume all risks inherent in participation in such program, whether they are apparent to me or not. I certify that I am in good physical health and able to participate. Nevertheless, I acknowledge that participation carries an inherent risk of injury to my person and damage to my property. I hereby waive and release, for myself and for my heirs and assigns, any and all claims, causes of action, or liabilities which may hereafter accrue against the School District of Sheboygan Falls, its affiliates, their agents, employees, volunteers, officers, directors, successors and assigns, School District of Sheboygan Falls, City of Sheboygan Falls and any and all sponsors, their representatives and successors, that may arise as a result of my participation in the School District of Sheboygan Falls' "Flying Falcon 5K Color Run", including any and all claims for personal injuries caused by the School District of Sheboygan Falls' negligence. Further, I hereby grant full permission to any and all of the foregoing to use any photographs, motion pictures, recordings or any other record of these events for any legitimate purpose, including commercial advertising, without monetary payment to me. (This information is protected by the Privacy Act.)

This section to be read and signed by parent/legal guardian if Participant is a minor: As the parent/legal guardian of the above-named Participant, I hereby waive and release on behalf of my child, any and all claims, causes of action, or liabilities which may hereafter accrue against the School District of Sheboygan Falls and its affiliates, their agents, employees, volunteers, officers, directors, successors and assigns, School District of Sheboygan Falls, City of Sheboygan Falls and any and all sponsors, their representatives and successors, by reason of my child's participation in the School District of Sheboygan Falls' "Flying Falcon 5K Color Run", including any and all claims for personal injuries caused by the School District of Sheboygan Falls' negligence. In addition, I accept full responsibility for the care and supervision of my child during the above-described run.

Signature of Participant or Parent/Legal Guardian: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

