## Run For The Children – April 22, 2023 Registration Form

First and Last Name		Date of Birth		Gender		
Phone Number			Email A	ddress		
( )						
Address	City			State (Country	if not US)	Zip Code

Emergency Contact Name	<b>Emergency Contact Phone Number</b>			
	( )			
Event Entering	Circle T-Shirt Size ( Must register by 3/27/23 to be guaranteed a t-shirt)			
<ul> <li>10K - \$35 (\$40 on Race Day)</li> <li>5K- \$30 (\$35 on Race Day)</li> <li>1K - \$15</li> <li>10K Student \$30</li> <li>5K Student - \$25</li> </ul>	Child XS S M L XL Adult S M L XL XXL XXXL			

## Waiver

I, the person submitting this entry, am aware that participating in an event such as a race or relay is a potentially hazardous activity, and that I (or my child, if I am signing as parent/guardian) should not so participate unless physically able. I verify that I am (or my child is) medically fit to participate and have sufficiently trained for the event prior to participation. I (and my child, if I am signing as parent/ guardian) agree to abide by the rules and decisions of any event official, relative to participation, and assume all risks associated with the weather such as high heat and/ or humidity, traffic, road conditions, all such risks being known and appreciated. In consideration of acceptance of the entry fee, and intending to be legally bound, I (and my child, if I am signing as a parent/guardian) and any one entitled to act on my (or our) behalf assume all risks associated with participation, and waive any and all claims whatsoever against, and fully release, race day volunteers and all event promoters, including but not limited to Run For The Children, AllSports Timing, Virginia's House-Dr. Goodall's House, GRMC, the City of Graham, Young County, other sponsors, and their representatives and successors, from all claims, damages, or liability of any kind arising from my (or my child's) participation in this event. I grant full permission to any and all of the foregoing to use my (and my child's) name, or photographs, video tapes, and other recordings of participation in this event, without obligation or liability to me (and my child). I also understand that entry fees are not refundable. I have read this agreement carefully, and understand it, and certify my agreement by my signature. Participant under 18 years of age must have his/her parent's/guardian's signature.

Participant (PRINT)	
Signature of participant (or Guardian if participant is under 18)	
I would like to include an additional donation of: \$	

Turn this form in with payment to Virginia's House, 729 Elm St., Graham, Texas 76450