

## West Seattle 5K Run/Walk - Sunday May 22, 2016 Registration Form

Please fill out form completely. One entrant per form. Print and send by May 14, 2016 to: West Seattle High School PTSA - 5K Run 3000 California Ave SW Seattle, WA 98116

First Name	Last Name	
Birthdate	Gender	
	Please ensure the above information is correct so we can track your finish time in our system properly	
Street Address		
City	State Zip	
E-Mail	Day Phone:	
T-shirt Size XS S	M C L XXL NOTE: T-shirts are not available to free participants (6 and under)	
Event Category		
Please choose the event yo	u wish to register for:	
	Registration Fee:	
Adult - Run	\$30 postmarked by April 1 or \$35 postmarked by May 14 After May 14, re	egister
Adult - Walk	\$30 postmarked by April 1 or \$35 postmarked by May 14 online or in pe	rson.
19 and Under - Run	\$20 postmarked by April 1 or \$25 postmarked by May 14 westseattle5k.c	:om
19 and Under - Walk	\$20 postmarked by April 1 or \$25 postmarked by May 14	
6 and Under	☐ Free	
	I would like to make an additional donation to the West Seattle 5K	
	Total Amount	
	Payment Type: Cash	
	Check - please make checks payable to "West Seattle High School PTSA"	
	○ Visa or Mastercard	
	Number: 3 Digit CV#:	
	Expiration: Cardholder Name:	
Waiver		
UNLESS THEY ARE MEDICA FACILITES OPEN TO THE P CERTAIN INHERENT RISKS INCLUDING DEATH. YOU U ANY REGISTERED PARTY, WAIVE, DISCHARGE AND C SEATTLE, ROGUE MULTI-S PARTICIPATION IN THE EVI	TICIPATION IN THE EVENT IS POTENTIALLY HAZARDOUS, AND THAT A REGISTERED PARTY SHOULD NOT PAR ALLY ABLE AND PROPERLY TRAINED. YOU UNDERSTAND THAT EVENTS MAY BE HELD OVER PUBLIC ROADS PUBLIC DURING THE EVENT AND UPON WHICH HAZARDS ARE TO BE EXPECTED. PARTICIPATION CARRIES WIST THAT CANNOT BE ELIMINATED COMPLETELY RANGING FROM MINOR INJURIES TO CATASTROPHIC INJURIES UNDERSTAND AND AGREE THAT IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE EVENT, YOU THE HEIRS, PERSONAL REPRESENTATIVES OR ASSIGNS OF YOU OR THE REGISTERED PARTY DO HEREBY RECONVENANT NOT TO SUE EVENTBITE, THE WEST SEATTLE HIGH SCHOOL PTSA, ORSWELL EVENTS, LLC, THE PORT OR ANY EVENT SPONSORS FOR ANY AND ALL LIABILITY FROM ANY AND ALL CLAIMS ARISING FROM ENT BY YOU OR ANY REGISTERED PARTY. I GRANT PERMISSION TO ALL OF THE FOREGOING TO USE ANY PICTURES, RECORDINGS, AND OTHER RECORDS OF THIS EVENT FOR ANY LEGITIMATE PURPOSE.	AND TH IT S OU AND RELEASE,
Signature:	Date:	

Parent or guardian must sign for participants under 18.