

Narcoossee Elementary 1st Annual 5K Superhero Run



November 3, 2012

REGISTRATION FORM

Full Name: (Print) _____
(first) (last)

Address: _____

City: _____ State: _____ Postal/Zip Code: _____

DOB: _____ Telephone: (_____) _____

Email: _____

Emergency Contact: _____ Phone #: _____ Relationship: _____

Parent Name (If under 18 years Old) _____
(Print)

Gender: ☐ Male ☐ Female

Age group at time of race: ☐ 10 & under ☐ 11-14 ☐ 15-18 ☐ 19-29 ☐ 30-39 ☐ 40-54 ☐ 55 & over

Race Pre-Registration Fees: ☐ Adult: \$20 ☐ Teacher: \$15 ☐ Student: \$15

T-Shirt - Adult Sizes: ☐ SM ☐ Med ☐ LG ☐ XL Kids Sizes: ☐ 6-8 ☐ 8-10 ☐ 10-12

Refunds: Registration fees are non-refundable.

Payment

Please make checks payable to: **Narcoossee Elementary School**

Please mail completed registration form with payment to:

Phone: (407) 892-6858

Email: davische@osceola.k12.fl.us

Narcoossee Elementary School

Attn: Superhero Run 5k

2690 N. Narcoossee Rd.

Saint Cloud, FL 34771

WAIVER AND RELEASE STATEMENT

(All participants must read and sign)

I have read the accompanying event information and understand the policies of the event. I know that running and walking are potentially hazardous activities. I should not enter unless I am medically able and properly trained. I assume all risks associated with my voluntary participation in the event, including but not limited to, falls, contact with other participants, the effect of the weather, traffic and all conditions of the course, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry, I for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue and waive, release and discharge Narcoossee Elementary School, Osceola County School District, the town of Saint Cloud, all sponsors, race officials, workers and volunteers, their representatives, successors for any and all claims or liability, whether seen or unforeseen, for death, personal injury or property damage arising out of, or in the course of my participation in this event. I further grant full permission to the above mentioned sponsors, organizers and or agents authorized by them, to use my photograph, video recordings or other record of the event for any reasonable purpose.

Signature of Participant
(Parent/Guardian signature if under 18 years of age)

Date