

CHRISTALIS 5K SUPERHERO RUN/WALK REGISTRATION FORM

First Name: _____ Last Name: _____
Date of Birth (MM/DD/YYYY): _____ Gender: Male Female
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Email: _____
Emergency Contact Name: _____
Emergency Contact Number: _____

I am running in the: Virtual 5K Virtual Kiddie Run

Age category:

15 & under 16-19 20-29 30-39 40-49 50-59 60+

How did you hear about us?

Email Twitter/Facebook/Instagram Online Calendar Radio
 Flyer/Poster (If a poster, let us know which location: _____)
 Family/Friend Other: _____

T-Shirt Size:

Women: XS S M L XL 2XL 3XL

Men: XS S M L XL 2XL 3XL

Release: I know that running is a potentially hazardous activity. I should not run unless I am medically able and properly trained. I assume all risks associated with participating in this event including, but not limited to falls, contact with other participants, the effects of weather, traffic and road conditions, all such risks being known and accepted by me. Having read this waiver and initialed this entry form, I for myself and anyone entitled to act on my behalf, waive and release Christalis, Washington Adventist University, all promoters, representatives, agents, sponsors, municipalities and participants from claims liabilities of any kind from my participation in this event. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings, videos or any other recording of this event for legitimate purposes.

I hereby acknowledge that I have read the above information and agree with the terms and conditions set forth.

I understand that there are no refunds for this event.

I understand that there is a \$5 transferring fee.

Signature of Participant: _____ **Date:** _____

If under the age of 18, please have a parent or guardian sign on your behalf.

As legal guardian of _____, I consent to the above listed terms and conditions.

Parent/Guardian Signature: _____ **Date:** _____