

Deweyville Town Bonneville Shores 5k Run and 1 mile Run/Walk

Wednesday, July 4, 2012

Race Day Schedule

Check-in & Race-day registration 6:30 am
5k Start 7:00 am
1 mile run/walk start 7:10
Award Ceremony 8:30

First and Last Name(s) _____

Street Address _____

City, State, Zip _____

Phone _____ Email _____

Age on Race Day _____

Male Female (circle one)

5k 1 Mile (circle one)

Shirt size Adult: S M L XL 2XL 3XL Child: S M L Circle sizes needed

Key Information: Both the 5k run and the 1 mile run/walk begin at the Deweyville Town Park. The 1 mile run is on a groomed walking trail. 5k run includes strenuous portions with rocky, steep, up and down jeep trails. This race coincides with many other 4th of July activities at the park, including breakfast. Medalists get a complimentary breakfast, and can ride in the parade!

Liability Release and Parental Consent: In consideration of the acceptance of my application for the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damage, or death, which may hereafter occur to me because of my participation in this event. This release is intended to discharge in advance the Town of Deweyville, its officials, officers, employees, volunteers, and agents for liability, even though that liability may arise out of negligence on the part of person or entities mentioned above. I understand that this is a recreational activity that involves an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release, and assumption of risk is binding on my heirs and assignees.

(Parent/Guardian): I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. I fully understand that Deweyville Town, its officials, officers, employees, volunteers, and agents participating in the event will provide no medical insurance for such treatment, and that the cost thereof will be at my own expense.

I have read and understand the foregoing registration liability release and parental consent, and agree to all of its terms and conditions.

Signature of Entrant: _____ Date _____

Signature of Parent/Guardian if Entrant is under 18 years of age.

Send completed registration forms to:

Questions? Contact:

Beva Marble 435 257-7170
9365 N. Hwy 38
Deweyville, Ut. 84309

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Deweyville, Ut. 84309