

INDIVIDUAL ENTRY FORM WAIVER AND RELEASE OF LIABILITY: WAIVER:

Participant waiver and release of liability. I know that running/walking a road race is a potentially hazardous activity. I should not enter and run/walk unless I am medically able and properly trained. By signing below I am affirmatively representing that I am well trained in the sport of recreational running, am in good physical condition, capable of entering and running this race, and that I am not aware of any medical or health condition, or of any physical defect that would cause me to be unable to run said race, or that would otherwise result in injury to myself or others or aggravate any medical, health or physical condition. I assume all risks associated with running/walking this event including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, or extreme cold; all such risks being known or of which I am aware and which are understood by me. I hereby further understand that and knowingly undertake the risks inherent in the conditions of the road and traffic on or near the course. Having read this waiver and knowing these facts, and in consideration of your accepting my entry to participate in the NGA-VT VT Remembers 10k events, I, for myself and anyone entitled to act on my behalf, waive and release the Vermont Army National Guard, NGA-VT, Century 21, RunVermont and all other sponsors, their representatives and successors or assigns from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of the negligence or carelessness on the part of the persons named in this waiver. I hereby give my permission to the event organizers and sponsors to use my name and/or picture in any publication, broadcast, telecast or other account of this event without limitation or obligation of further compensation thereof. By signing this waiver and release I am signifying that I fully understand its significance.

Age Day of Race _____ Sex: __M__ F

Print Name: _____

Email: _____

Address:

(Street or P.O. Box) City State Zip

Phone :() _____

***Please Circle: 10K Run // Walk // Ruck March // Wheel chair division // Kids 1 Mile**

Civilian // Military _____

Ruck March: Team/Individual/Platoon and List P.O.C. _____

\$22.50 10k // \$15.00 Youth fun run

\$10.00 unisex - Cotton T-shirt

\$15.00 unisex - Tech wear T-shirt

Size: XS // S // M // L // XL // XXL

Total Enclosed: \$ _____

Signature: _____

(Signature of parent or guardian if entrant is under 18 years of age)

VALID PHOTO IDENTIFICATION REQUIRED PRIOR TO STARTING RACE

In lieu of not participating as a competitor please accept this donation \$ _____