Jensen Beach Key Club, FRC SPAM Robotics and MCM Timing and Results, LLC



Saturday, April 19, 2014

Sewall's Point Town Hall

Race will follow the Pineapple Race course, a beautiful course with lots of shade.

Race Check-in and Registration opens at 5:30 A.M. ~ Race starts promptly at 7:00 A.M.

Entry fee: \$25 before April 16th, \$30 after April 16th and day of race,

Racers can get sponsors in lieu of entry fee (minimum \$35 in pledges required),

prizes given (see Shriners5K.wordpress.com for details)

Use entry form below, or register online at http://www.Active.com - your choice!

Computer chip timing, t-shirts to the first 250 runners, awards to overall male/female, masters male/female winners, and age group awards three deep in 5-year age groups from 14 and under to 79 and over. Two water stops on 5K course and refreshments and snacks available at the finish.

For more information, email shriners5k@gmail.com

Shriners 5K Run-Walk Registration Form

Name:	
Address:	City/State: Zip:
Date of Birth: Age on Race Day:	E Gender: M F
Phone: Email:	
Cotton T-Shirt Size (circle): XS S M XL 2XL	
Race fee: \$25 (on or before April 16th)	\$30 (after April 16th)
Make checks payable to: JBHS Key Club	Mail to: Jensen Beach High School, Attn. Key Club

All participants MUST read and sign waiver, located on reverse side. Incomplete or unsigned entry forms will not be accepted.

2875 Northwest Goldenrod Road, Jensen Beach, FL 34957

INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED! In consideration for participation in the Shriners 5K Run-Walk, I hereby expressly and affirmatively state that I or my child named herein wish to participate in the above stated activity. I realize that participation in this activity involves risk and injury including but not limited to, loss of future earning capacity, loss of or damage to personal property, various degrees in severity of bodily (physical) injury and even the possibility of death. I also recognize that there are many other risks of injury including serious and disabling injuries, which may arise due to my or my child's participation in this activity and that it is not possible to specifically list each and every individual risk. I understand that these risks of injury could arise out of negligent maintenance and/or negligent supervision on the part of the Martin County School Board, Jensen Beach High School Key Club, FRC SPAM Robotics, MCM Timing and Results, LLC, the race sponsors, and the Town of Sewall's Point, their employees, agents and representatives in the event listed above.

However, knowing the material risk and appreciating, knowing and reasonably anticipating that other injuries and even death are a possibility, I hereby, on my behalf or on the behalf of my child, expressly assume all the delineated risks of injury, all other possible risks of injury and even death which could occur by reason of my or my child's participation and for myself, my personal representatives, executors, administrators, heirs, next of kin, successors and assigns, do hereby release, remise, and forever discharge Martin County School Board,, Jensen Beach High School Key Club, FRC SPAM Robotics, MCM Timing and Results, LLC, the race sponsors, and the Town of Sewall's Point, their agents, employees, representatives, successors and assigns of all liabilities, claims, actions, causes of action, suits, damages, costs, or expenses whatsoever, in law or in equity, which I may have or my child may have against them.

I represent that I or my child are in satisfactory physical condition to participate in the activity. I authorize any person connected with the activity or the Town of Sewall's Point to administer any and all available first aid to me or my child, as they deem necessary. I further authorize medical transportation to a medical facility or hospital for the treatment necessary at my expense. This Waiver and Release will apply for each and every day I /my child is engaged in the activity without requiring me to sign an additional form for each day or activity. At no cost, I hereby grant full permission to any and all of the foregoing to use, reproduce and/or broadcast any photographs, videotapes, motion pictures, recordings, or any other record of this event for any purpose.

This Waiver and Release is governed by the laws of the State of Florida, and exclusive jurisdiction shall be in the Nineteenth Judicial Circuit in and for Martin County, Florida. If any part of the agreement is determined to be unenforceable, all other parts shall be given full force and effect.

I have had the opportunity to ask questions. Any questions that I have asked have been answered to my complete satisfaction. I subjectively understand the risk of my or my child's participation in this activity and knowingly and appreciating these risks, I voluntarily participate, assuming all risks of injury or even death, due to my participation or my child's participation.

I HAVE READ AND UNDERSTAND THIS WAIVER AND RELEASE OF LIABILITY AGREEMENT. I VOLUNTARILY AGREE TO ITS TERMS

Signature of Participant	Date of Birth	Date	
Signature of Parent/Legal Guardian	(If Participant is under 18)	Date	
In the event of an emergency, pleas	e contact	Phone Number	