

LONGHORN STAMPEDE
5K COLOR RUN/WALK and 1K KIDS FUN RUN
Barnard Depot
Saturday April 22, 2017
Registration 8:30/5K 9:00am/Kids Run 9:45 am

Mail registration form to: Danyell Wiederholt 401 Washington Guilford, MO 64457 Make checks out to South Nodaway PTO. Questions, call 660-6541-3595

Name: _____
(Please print)

Address: _____

City: _____ State: _____

Email: _____ Phone: _____
(Email address will be used only for communication regarding the race)

Emergency Contact: _____ Phone: _____

I am running 5K I am not running I'd like to sponsor I would like to volunteer

Registration Cost: \$20.00 (includes shirt)

The Kids FUN Run is FREE – T-shirt cost 8.00

T-shirts:

T-shirts are guaranteed to all registrants who sign up prior to April 5th.

YS YM YL S M L XL 2XL 3XL

Release Waiver:

PLEASE READ THIS DOCUMENT (THE "WAIVER AGREEMENT") CAREFULLY BEFORE SIGNING. THIS WAIVER AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS AND WILL LIMIT OR ELIMINATE YOUR ABILITY TO BRING A FUTURE LAWSUIT.

I know that running is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I hereby certify that I am in good health and I have trained to run the distance of the race, which I am entering. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, including rain, heat, and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry into this running race, I, for myself and anyone entitled to act on my behalf, waive and release the South Nodaway R-VI school district., its administration, faculty, staff, agents, volunteers and employees, the State of Missouri, the City of Barnard, Nodaway County or other governmental bodies or locations in which events or segments of events are held, all sponsors, their representatives and successors, from all claims or liabilities of an kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I understand that bicycles, skateboards, baby joggers, roller skates or inline skates and animals are not allowed in the event and I will abide by this guideline. I authorize any healthcare provider to release any and all information pertaining to my healthcare, medical condition and medical treatment as a result of my participation in this South Nodaway Longhorn Stampede 5K event to the South Nodaway school district and its staff.

Signature: _____ Date: _____

If signature above is a parent or guardian of the registrant, please check here: _____