



STC Tech Trot

5K/Fun Run

First Name _____ Last Name _____

Address _____

City _____ State _____ Zipcode _____

Email _____ Phone Number _____

Age _____ Gender Male Female

Shirt Size Youth Adult
 Small Medium Large X-Large XX- Large

Check One Fun Run/Walk 5K Run/Walk

REGISTRATION FEES

Pre-Registration (Postmarked by April 29, 2016)
 \$15 Fun Run/Walk \$20 5K Run/Walk

Day of Event (After April 29, 2016)
 \$15 Fun Run/Walk \$25 5K Run/Walk

Payment Cash Check # _____

For Students only:
School District _____

STC Shop Name _____

LIABILITY WAIVER

Participant holds The Schuylkill Technology Center (STC) and IU29, its directors and employees harmless from all claims for injury to or the death of any person, and for damage to or the loss of any property arising out of or attributed directly or indirectly to the operations or omissions of the organization. User indemnifies the organization for all damage to property belonging to the organization and for all injuries to or the deaths of any representatives or employees of the organization resulting from all acts or omissions.

This organization is not responsible for user's property, and is not liable for the acts or omissions of any event participants.

ACKNOWLEDGEMENT OF RISK:

I understand and am fully aware of the risks involved with my participation in the outdoor running event. These risks include but are not limited to: property damage or loss; minor bodily injury; sever bodily injury and death. Furthermore, I recognize that participation in this activity involves risks incidental thereto, including but not limited to, physical contact with other persons, falling on to the ground, falling on other participants or being fallen on by other participants; abrasions or lacerations from contact with the ground or other participants; pulmonary injuries from walking or running and/or walking or running beyond ones personal limits; injuries due to negligence of other participants or spectators; musculoskeletal injuries from over training; head injuries from falling or physical contact with other participants or spectators. I/ my child is voluntarily participating in this activity with the knowledge of the risks involved and hereby agree to accept any/all inherent risks of property damage, bodily injury, or death.

Signature _____ Date _____

Parent Signature (if under 18 years old) _____