

Run Walk Roll AGAINST BULLYING

Registration Form—Event Date: October 13, 2018

Kirby Park, Market Street, Wilkes-Barre

First Name: _____ Last Name: _____

Email: _____ Phone #: _____

Address: _____ Birthdate: _____

Age on 10/13/18: _____ Emergency Contact Name: _____ Emergency Contact Phone _____

Choose one (Mark with X): 5K Run (timed) _____ OR Walking /Rolling (not timed) _____ (see prices below)

Circle T-shirt size: Youth Small Youth Med Youth Large
 Adult Small Adult Med Adult Large Adult XL Adult XXL (+\$2) Adult XXXL (+\$3)

Registration Dates and Fees:

Run, Walk, Roll at 9:00 am!	On or Before Sept 30, 2018		On or After Oct 1, 2018 (up to day of race)	
	18 yrs old & up	Under 18 yrs old	18 yrs old & up	Under 18 yrs old
5K Run	\$25	\$15	\$30	\$20
1 mile Fun Walk & Roll	\$20	\$15	\$25	\$20

Register by Oct 6th to guarantee a t-shirt in your size. Extra t-shirts may be available on the day of the event on a first come first serve basis.

Mail this form along with payment to: Kim Leary, 150 Wadham St, Plymouth, PA 15641 Make checks payable to: WWV Activity Fund;
 Memo: Run Walk Roll Against Bullying

Total Amount Due: _____ **Paid:** _____ **Cash / Check (circle one)**

Online Registration: <https://runsignup.com/Race/PA/Kingston/WWVRunWalkRollAgainstBullying>
Check us out on Facebook! Run Walk Roll Against Bullying Hosted by WWHS

Race Packet Pickup and Day of Race Registration: Registration bags with t-shirts and bib numbers will be available for pickup on Friday October 12th at Valley Running Store, 900 Rutter Ave, Forty Fort 4 – 7 pm OR on the day of the race, Saturday Oct 13th between 8 and 9 am.

Waiver: In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director, RunSignUp.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I should not enter and run or walk unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a race. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/ or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver. Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

Participant (Parent if under 18) Signature: _____ **Date:** _____