



RACE FOR THE HOMELESS

Day of Registration Form

Bib Number _____ (assigned by registration team)

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Email _____

Age _____ Male Female

Event: 5K Run 10K Run 5K Walk

Age Division: ___0-14 ___15-19 ___20-24 ___25-29 ___30-34 ___35-39 ___40-44
___45-49 ___50-54 ___55-59 ___60-64 ___65-69 ___70+

Shirt Size: ___ Small ___ Medium ___ Large ___ X-Large ___ XX-Large

\$20 Registration Fee (Credit / Cash / Check payable to "New Heights")

I know that running/walking is a potentially hazardous activity. I understand that I should not participate in the 2019 Race for the Homeless unless I am medically able and properly trained. I agree to abide by any decision of the event organizer relative to my ability to safely complete the race. I assume all risks associated with running/walking in this event, including but not limited to falls, contact with other participants or spectators, the effects of the weather and conditions of the course, all risks being known and appreciated by me. I also assume any risk associated with accepting and digesting post race food or beverages at this event. Having read this waiver and knowing these facts and in consideration of you accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release, the City of Vancouver, Clark County Washington, The Historic Trust, New Heights Church, employees, all participating sponsors and directors, volunteers, their representatives and successors, from all claims or liabilities of any 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 and entities named in this waiver. I grant permission to all the foregoing to use my name, likeness and identity in any photographs, motion pictures, recordings of any other record of this event for any legitimate promotional purpose. IF THE PARTICIPANT IS A MINOR, THE PARENT OR GUARDIAN COMPLETING THIS ENTRY IS AUTHORIZING THEIR PARTICIPATION AND ACCEPTING THE TERMS OF THIS WAIVER AND RELEASE.

Signature _____

Date _____

For Official Use Only:

Payment Method	Received From	Misc. Notes