

Clinton County Farm City Festival

5k Color Fun Run

When: September 23, 2017 Where: Clinton County Fair Grounds

Time: Race Registration opens at 9:00 am and Race at 10:00 am

Entry Fee: Pre-registration by Sept. 8th = \$10 Day of Race registration = \$15

Pre-register: Mail to Hope Mitchell P.O. Box 787 Lock Haven, PA 17745 with a check payable to: Clinton BBBS

For questions contact: Hope Mitchell at 570-893-2585 ext. 3343 or

E-mail hmitchell@clintoncountypa.com

Please Wear White!

****All proceeds donated to Big Brothers Big Sisters of Clinton County****

Participant

First Name _____ Last Name _____

Address _____

Telephone _____ Email _____

Date of Birth _____

Emergency Contact & Phone _____

Waiver and Release: I know that running a Color Fun Run is a potentially hazardous activity and may result in accidents, illness, or serious injury. By signing this Waiver and Release Form, I declare that I am medically able, in proper physical condition and capable of safely participating in the Event. In consideration for being allowed to participate in the Event, I agree to defend, release and hold harmless Clinton County from any and all actions, claims, liabilities, damages, costs, expenses (including attorney fees and medical expenses) and losses that may directly or indirectly result from (1) my conduct, (2) my participation in the Event or (3) the conduct of any other persons (including other Event participants and/or members of the general public), who may cause me injury, damage or harm before, during, following and at the Event. I understand and agree that this Waiver and Release is binding on me and my heirs, successors, personal and legal representatives. I hereby give permission to Clinton County to use my name, photograph, videotape, motion picture recording, voice and likeness for pre and post Event publicity. I have carefully read this Waiver and Release and fully understand its content. By my signature below, I consent and agree to the terms of this Waiver and Release.

Signature*: _____

Date: _____

***I am the parent/legal guardian of a child under the age of 18 years, who is allowed to participate in the event. By signing below, I consent and agree to the application of this Waiver and Release as it relates to each minor child I have allowed to participate in the event (print name(s) of minor children):**
