

# 1st Annual Trinity Run 5-K Run/Walk



Date: Race Day: August 5, 2018

Start/Finish: St. Lawrence Parking Lot - 380 Franklin St, Great Bend, PA 18821

Time: 7:30 AM Registration / T-shirt & Bib Pick Up  
9:30 AM Race Begins

Name: \_\_\_\_\_ Age: \_\_\_\_ Male or Female \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Codes: \_\_\_\_\_

e-mail \_\_\_\_\_

How did you hear about the race?: \_\_\_\_\_

Please circle appropriate size: S M L XL

Race Entry Fee: \$20.00

(Deadline for mailing is July 25, 2018; sign up day of race)

Make Checks Payable to:

St. Lawrence (5k)

Mail check and registration to:

Jim Riecke, 106 Mountain Vista Lane, Great Bend, PA 18821, drop off  
at Parish Office, 15 East Church St. Susquehanna, PA 18847 or in  
the Collection Basket at any church.

*(All entry fees are non-refundable and non-transferable)*

All proceeds will benefit the  
various fundraising needs of  
St. Martin's, St. Lawrence,  
and St. John's.

Registration forms online at: [www.saintslawrencemartinjohn.com](http://www.saintslawrencemartinjohn.com)

Forms will also be in the bulletin and can be returned by

mail, parish office, or collection baskets.

**Accident waiver and release of liability: Release of name and likeness**

I know that running/walking a race is a potentially hazardous activity. I certify that I am physically fit have sufficiently trained and prepared for participation in the event and have not been advised otherwise by a qualified medical person. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I hereby consent to receive medical attention which may be deemed advisable in the event of an injury, accident and/or illness during this event. I understand that all evacuation and medical cost for participants and volunteers will be borne by that person or their heirs. The race organizers and sponsors are in no way liable or responsible for <sup>medical</sup> costs or emergency evacuations.

The race directors have addressed all safety issues on the paved and dirt/hard pack and loose gravel race course trails areas. I assume all risks associated with running in the event, including, but not limited to, falls, contact with other participants, volunteers, race officials, sponsors, walkers, baby strollers or "baby-joggers", in-line-skating, dogs on leashes, bicycles, the effects of the weather, including high 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, I hereby take action for myself, my heirs, executors, next of kin, administrators or anyone else who might claim on my behalf, waive and release the following Entities or Persons: St. Martin's; St. Lawrence; St. John's, organizers of the race, all involved municipalities or public entities ( and their respective agents and employees) the event holders, the event sponsors (and their directors, officers, volunteers, representatives and agents), event volunteers and event directors, from all claims or liability for death, personal injury, or property damage of any kind or nature whatsoever arising out of, or in the course of, my participating in this event whether same be caused by negligence or fault. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown and I indemnify and hold harmless the entities or persons mentioned in this paragraph from any or all liabilities or claims made by any other individual or entities as a result of my actions during this event.

Parents or Guardian waiver for minors (under 18-years old) if applicable. The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all parties referred to above from all liability, loss, cost, or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to act and release said parties on the behalf of the minor and parents or legal guardian. Minors accepted only with a parent or guardian's signature.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of Participant \_\_\_\_\_

Parent or guardian if under 18 \_\_\_\_\_