



Crete Backpack Program 5K Fun Run/Walk & Kid's Mile Run

Saturday, September 15, 2018

Run starts at 8:00 A.M. with sign-in beginning at 7:30.

Name _____
(please print first and last name legibly)

Address _____
(street) (city) (state) (zip)

Email _____ Phone Number _____

_____ **I want to participate in the 5K Run Run/Walk**

**Please include \$25 registration fee with registration. Make checks payable to "Crete Backpack Program"

_____ **I want to participate in the Kid's Mile Run**

**Please include a freewill donation with registration. Make checks payable to "Crete Backpack Program"

**Mail or drop off registration and entry fee by September 8th to

United Church of Christ
First Congregational
Attn: Backpack Fundraiser
440 East 12th Street, PO Box 263
Crete, NE 68333

For questions, please contact Jeff Hagaman at 402-826-2039

Waiver/Release executed on Saturday, September 15, 2018:

In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors, and assigns, all claims of any nature arising from my participation in the 2018 Crete Backpack Program 5K Run/Walk & Kid's Mile Run and do hereby release the United Church of Christ, First Congregational, Crete Backpack Program, the Food Bank of Lincoln, and any race volunteers or sponsors of the event from any claim whatsoever arising from my participation in the event. I agree to abide by all the rules for participation, I understand the risks for such an run and have trained adequately in preparation and hereby certify that I take part in this event at my own risk and that I am insured against accident of injury. If, however, as a result of my participations, I require medical attention, I hereby give consent to authorized medical personnel to provide such medical care as deemed necessary. I release any rights to all photo and video taken during the event and agree to any publications. I hereby certify with my signature that I have read and understand this agreement.

Printed Name of Participant _____

Signature of Participant _____

Signature of Parent/Guardian if under 18 years old _____