



When: Saturday, January 29, 2011
 7:00-7:45 am Registration
 8 am 5K Race
 9 am 1 Mile Fun Run

Where: Roberts Elementary School
 Tallahassee, Florida

Entry Fee: \$15 Early Registration (prior to January 21st)
 \$20 Race Day Registration
 \$50 For families with 4 or more participants

Registration: Register by mailing completed form with payment to:
 Roberts Relay for Life
 ATTN: Beth Benners
 5777 Pimlico Dr.
 Tallahassee, Florida 32309

5K Road Race and 1 Mile Fun Run

Proceeds to benefit
Relay for Life



Name: _____

Gender (Circle): Male Female DOB & Age on 1/29 _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

T-Shirt Size (Circle): Youth: S M L
 (While supplies last) Adult: S M L XL

Entering (Circle): 5K 1 Mile

*Make checks payable to **Roberts Relay for Life.** Check # _____

WAIVER: In consideration of your acceptance of my entry as a participant in the Red Fox Trot 5K and 1 Mile, I, the undersigned, for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages, for death, personal injury or loss of property against Roberts Elementary School, its officers and directors, members or representatives and all volunteers and others promoting or assisting in anyway the promotion or organization of Roberts Elementary School, which may arise from my participation in the these races on January 29, 2011 or while traveling to or from the event, even if caused in part by the negligence or negligent actions or other fault of the parties or persons I am hereby releasing by the dangerous or defective condition of any property or equipment owned, maintained or controlled by them and/or because of the liability without fault. My participation is voluntary and done at my own risk. I understand that running a road race is a potentially hazardous activity and that I should not enter unless I am medically able and properly trained. I attest that I am physically fit and sufficiently trained for the competition of this event. I fully understand I am forever giving up in advance any right to sue or make claims against the parties I am releasing if I suffer injuries and damages even though I do not know to what extent those injuries and damages might be and am voluntarily assuming the risk of such injuries and damages. I will assume my own medical and emergency expenses in the event of an accident or other incapacity or injury resulting from or occurring in my participation. I agree not to wear headsets, run with dogs, baby joggers or strollers during the race. I have read and understand everything written above and I voluntarily sign this agreement.

SIGNATURE: _____ **Date:** _____
 Signature of Parent or legal guardian if under 18 years of age.

*For additional information, please contact **Kim McKiernan** at mckiernank@leonschools.net.