



FAMU First Lady Grape Harvest Festival

5K Run/Walk & 1 Mile Fun Run

DATE/TIME: Saturday, August 27, 2011, 8:15AM SHARP!
REGISTRATION: 6:45AM
LOCATION: Center for Viticulture and Small Fruit Research, 6505 Mahan Drive, Tallahassee 32317
AWARDS: Top 3 Overall Male/Female, 3-Deep in 10-Year Age Groups
COURSE: On- & off-road double loop through the beautiful vineyards at FAMU
MORE INFO: Contact: Bobby R. Phills, 850-599-3996(W), 528-4616 (C); bobby.phills@famu.edu

REGISTRATION INFORMATION

Name: _____ **Age:** _____ **DOB:** _____ **M / F**
(Circle one)

Phone: (____) _____ **Email:** _____ @ _____

Address: _____ **City:** _____ **State:** ____ **ZIP:** _____

Shirt (check one): None Youth Med Small Med Large XL

	<u>On/Before 8/26</u>	<u>Race Day</u>
5K Registration Fee (pre-registration strongly encouraged)	<input type="checkbox"/> \$15	<input type="checkbox"/> \$20
1 Mile Registration Fee (children under 15, please!)	<input type="checkbox"/> \$10	<input type="checkbox"/> \$15
Students (must provide current student ID)	<input type="checkbox"/> \$10	<input type="checkbox"/> \$15
I want to make an additional donation for the First Lady Run Walk-a-thon:	\$ _____	
Total Amount Enclosed:	\$ _____	

WAIVER: In consideration of your acceptance of my entry as a participant in the First Lady Grape Harvest Festival Run/Walk, I, the undersigned, for myself, my heirs, personal representatives, executors, administrators and assigns, waive and release any and all claims for damages, for death, personal injury or loss of property against XXXX its officers, directors, employees, members or representatives and all volunteers and others promoting or assisting in anyway the promotion or organization of The First Lady Grape Harvest Festival Run/Walk, which may arise from my participation in the these races on August 27, 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.

REGISTRATION also AVAILABLE AT http://www.active.com/event_detail.cfm?event_id=1660855