



## 2012 Frost Your Fanny 5K Trail Run/Walk Registration

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email (will be used for updates on the race) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex M F

Shirt Size - shirts available for first 100 registrants (circle one) S M L XL

Registration \$20

\_\_\_\_ My Payment is enclosed. (Make checks payable to Du Good Events)

**Packet Pick-up:** February 17, 5:30 - 6:30 pm and February 18, 7:30 - 8:30 am at pavillion by the lake

**Mail registration form to: Du Good Events • P. O. Box 921 • Ulysses, Kansas 67880 • phone 620-575-6555**

**ONE ENTRY PER APPLICATION • THIS MAY BE REPRODUCED • NO REFUNDS, EXCHANGES OR TRANSFERS**

**EVERY PARTICIPANT MUST SIGN THIS WAIVER! Parent/Guardian for anyone under 18 must sign the waiver.**

STANDARD ACKNOWLEDGMENT, WAIVER AND RELEASE FROM LIABILITY. ALL ATHLETES MUST READ AND SIGN. PLEASE READ CAREFULLY BEFORE SIGNING THIS ACKNOWLEDGEMENT, WAIVER AND RELEASE FROM LIABILITY (AWRL). I acknowledge that a 5K is an extreme test of a person's physical and emotional limits and carries with it the potential for death, serious injury and property loss. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN A 5K, specifically I assume the risk of participating in the DU Good Events Frost Your Fanny 5K Trail Run/Walk. I certify that I am physically fit, have sufficiently trained for participation in this event, and have not been advised otherwise by a qualified medical professional. I hereby take the following actions for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I AGREE to abide by the rules and regulations of this event; b) I WAIVE, RELEASE, AND DISCHARGE from any and all claims or liabilities for death, personal injury, property damage, theft or damages of any kind, which arise out of or relate to my participation in, or my traveling to and from the DU Good Events Frost Your Fanny 5K Trail Run/Walk, THE FOLLOWING PERSONS OR ENTITIES: DU Good Events, City of Ulysses Parks and Recreation Department, and Frazier Park, and all other event sponsors, race directors, event producers, volunteers, and the officers, directors, employees, representatives and agent of all of the above; c) I AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein; and d) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions during the DU Good Events Frost Your Fanny 5K Trail Run/Walk. I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT AND I UNDERSTAND ITS CONTENTS.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date