Jackson Roadrunner Labor Day 5 Miler

September 3rd 2018 at Lake Graham

60 Lowell Thomas Dr, Jackson, TN 38301

Registration 6:30 AM Race 7:00 AM

\$5.00 Club Members \$15.00 Non Club Members

There will not be any online or preregistration. You can print this form out and bring it with you. We will accept exact change or checks. No shirts, no frills. This is a simple 5 mile race that you will score yourself. Awards will be very cheap.

Nickel and Dime stuff.

Watermelon for recovery!!

Age on race day

Name:

Gender

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Emergency contact info	D
unless I am medically able and properly trained, in good health, and I am properly trained. I agree in this event, including the right of any official to read the rules of the race and agree to abide by limited to: falls, contact with other participants, th conditions of the road, all such risks being know roller skates or roller blades, animals, and person Having read this waiver and knowing these facts act on my behalf, waive and release the Jackson representatives and successors from all claims of liability may arise out of negligence or carelessn	zardous activity, which could cause injury or death. I will not enter and participate and by my signature, I certify that I am medically able to perform this event, and ame to abide by any decision of a race official relative to any aspect of my participation deny or suspend my participation for any reason whatsoever. I attest that I have them. I assume all risks associated with running in this event, including but not nee effects of the weather, including high heat and/or humidity, traffic and the n and appreciated by me. I understand that bicycles, skateboards, baby joggers, nal music players are not allowed in the race and I will abide by all race rules. I and inconsideration of your accepting my entry, I, for myself and anyone entitled to a Roadrunners and the Road Runners Club of America, all event sponsors, their or liabilities of any kind arising out of my participation in this event, even though that ess on the part of the persons named in this waiver. I grant permission to all of the eas, recordings or any other record of this event for any legitimate purpose.
Signature:	Date:
Parent's Signature if under 18 years:	Date :