



## REGISTRATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Shirt Size:  XS  S  M  L  XL  2XL

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Target Race:

### Which description best matches your current fitness:

\_\_\_\_\_ Shamrock 'N Roll 5K

\_\_\_\_\_ New Strider (new to running or walking or getting back into running)

\_\_\_\_\_ Shamrock 'N Roll 10K

\_\_\_\_\_ Undecided at this time

\_\_\_\_\_ Steady Strider (already running 3 or more times a week and have completed a 5K)

### ASSUMPTION OF RISK FOR PARTICIPATION IN WEST STRIDE'S STRIDE STRONG TRAINING PROGRAM

I HAVE READ THE FOREGOING AND INTENTIONALLY AND VOLUNTARILY SIGN THIS GENERAL RELEASE, LIABILITY WAIVER AND PARTICIPATION AGREEMENT.

I know that running and participating in store events are potentially hazardous activities. I should not enter and run in store events or training programs unless I am medically able and properly trained. I agree to abide by any decision of an event official relative to my ability to safely complete a run. I assume all risks associated with running and participating in store events including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. I understand that running with baby joggers and animals is potentially hazardous and not allowed for this program. I understand that running with audio headsets is potentially hazardous and discouraged during training sessions. I assume all risks of injury to children, animals, equipment and myself.

Having read this waiver and knowing these facts I, the participant and anyone entitled to act on my behalf, waive and release West Stride, all West Stride employees, training program coaches and all other sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these activities even though that liability may arise out of negligence or carelessness on a part of the persons named in this waiver. This release includes all injuries and/or damages suffered by me before, during or after the event. I grant permission to all of the forgoing to use my name, images, photographs, motion pictures, recordings, or any other record of store events for any legitimate purpose.

I understand and agree that if the Training Program is canceled because of circumstances beyond the control of the Training Program committee and sponsors, including, but not limited to hazardous weather condition, Participant's entry fee will not be refunded or transferred to another Training Program.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_



Staff Use: Scan Barcode to ring up. **Payment Date:** \_\_\_\_\_ Place on Steph's desk.