

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

Age \_\_\_ M/F \_\_\_ Birth Date \_\_\_/\_\_\_/\_\_\_\_\_

E-mail \_\_\_\_\_

We welcome a \$5 donation per workout \$ \_\_\_\_\_

To help keep these workouts free for young athletes, here is a donation of \$ \_\_\_\_\_

Total enclosed: \$ \_\_\_\_\_

I know running a race is a potentially hazardous activity.

I should not enter and run unless I am medically able and properly trained.

I agree to abide by any decision of a race official relevant to my ability to safely complete this event.

I assume all risks associated with running in this event, including, but not limited to: falls, contact with other participants, effects of the weather, including high heat and/or humidity, and conditions of the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release all sponsors, including Arlington County VA, their elected and appointed officials and employees, Potomac Valley Track Club, USATF, Runners World Magazine, their officers, directors, agents, and employees, and all officials of this event from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

I understand this event is conducted under the regulations of RRCA, USATF, Alexandria City VA, and Arlington County VA.

I agree to release my name and photo for publicity purposes.

I understand that my name and address will be provided to the sponsors of this event.

Parent or guardian must sign for children under 18.

Signature (Parent or Guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_