

July 19, 2003
8:00 am



Race Day Registration
7:00 to 7:30am at the Reno Arch

Special Event Divisions: (Circle one)

Law Enforcement Fire Fighter EMT Joggler

Home Depot Or Other _____

First Name: _____ **MI:** _____ **Last:** _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Country: _____ **Gender: M** _____ **F** _____

Date of Birth: _____ **Age Day of Race:** _____

Email Address: _____

Phone Number () _____

OFFICIAL USE ONLY

ENTRY FEE \$15.00

Bring Registration form day of Race with Payment

BIB NUMBER _____

PAYMENT: CHECK OR CASH ONLY

PLEASE READ AND AGREE TO WAIVER

In consideration of my entry being accepted in the Run Reno 5k Race, I do hereby, for myself, my heirs, executors, and assigns, waive, release and forever discharge any and all rights and claims for damages that I may have or which may hereafter accrue to me against the International Sport Juggling Federation, Party Gras Mardi Gras, City of Reno and County, or any subsidiary of political subdivision thereof, its or their respective officers, agents, representatives, successor, assigns and sponsors for any and all damages that may be sustained and suffered by me in connection with my association with or entry or participation in the Run Reno 5K. I understand that a physical examination is not required to qualify to run this event and that all competitors participate at their own risk. (If in doubt ask your physician) I also understand that in the event this race cannot be held as scheduled because of an act of God or circumstances beyond control, the race is not liable to refund any money paid by me to participate. I release the right to any and all photographic material, including film, and computer information the Run Reno 5K may wish to release for this event without obligation to me. All persons under 18 years of age must have written consent of parent or legal guardian to compete. I, the undersigned parent or guardian, hereby consent to the applicant's participation and waive and release all rights and claims for damages as is more fully set forth above. I also hereby consent to permit emergency treatment in the event of injury or illness and further understand such treatment will be my responsibility for payment to any and all emergency facilities.

_____ (Signature)

_____ (Date)

www.runreno.com