

Race Date:

Middle School Cross Country

Thursday September 27 2001

Start Time:	03:30PM (Registration 02:45PM)
Location:	Floyd Dryden Middle School
Race Contact:	DefaultRaceDirector Unassigned
	none
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/event/2001/race/584
Course Description:	
2 Mile, DZ,FD Middle School meet, DZ Girls 36	pts, FD Girls 13 pts; DZ Boys 35 pts, FD Boys 20 pts
	RY FORM ENTRY FEES Kids 18 & Under - \$0
□volunteer - \$0	Adults Day of Race - \$0
Last Name	First Name
GENDER CIRCLE ONE (Male Female Non-Bina	
email	JTRR MEMBER: (YES NO) (if yes, skip phone,address)
MAILING ADDRESS	
STREET OR BOX	
CITY	PHONE
STATE	ZIP
trained, and by my signature, I certify that I am medically able to perform this event, participation in this event, including the right of any official to deny or suspend my pall risks associated with running or volunteering in this event, including but not lir volunteers, race personnel, contract service providers, employees, and spectators. the conditions of the road and/or trail including surrounding terrain. I understand the and I will abide by all race rules. If allowed by the Race Director, and if I am pushigger or stroller. Having read this waiver and knowing these facts and inconsider and Road Runners, the United States Forest Service, the state of Alaska, the Councessors from all claims or liabilities of any kind arising out of my participation this waiver. In addition, I acknowledge the contagious nature of communicable dise this event. I acknowledge that such exposure or infection may result in personal in	rardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly am in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my articipation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume nited to: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, I assume all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and nat bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, ing a baby jogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the ation of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail City and Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in eases and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in ury illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent
	BIB NUMBER:
SIGNATURE	(for race officials only)
SIGNATURE of parent or guardian if	under 18 DATE