

JRC Governors Cup



Juneau Trail and Road Runners is an affiliate member of the Road Runners Club of America.

Race Date: Start Time: Location: Race Contact: Saturday July 06 2002 10:00AM (Registration 09:15AM) Courthouse DefaultRaceDirector Unassigned

none

join JTRR https://southeastroadrunners.org/ results online: https://jtrr.org/event/2002/race/360

Course Description:

25th annual Governors Cup

| <u>Distance</u> □5k (5 km) □1 mile (1 miles) □1/2 mile (0.5 miles) □volunteer - \$0 | SPONS | ORED BY | ENTRY FEES Kids 18 & Under - \$0 Adults Day of Race - \$0 |
|--|---|---|--|
| Last Name | | First Name | |
| GENDER CIRCLE ONE (Male | | | |
| email | | | NO) (if yes, skip phone,address) |
| MAILING ADDRESS | | | |
| STREET OR BOX | | | |
| СПТҮ | | PHONE | |
| STATE | | | |
| trained, and by my signature, I certify that I am medica participation in this event, including the right of any of all risks associated with running or volunteering in the volunteers, race personnel, contract service providers the conditions of the road and/or trail including surrou and I will abide by all race rules. If allowed by the Ra jogger or stroller. Having read this waiver and knowin | ally able to perform this event, am in good h ficial to deny or suspend my participation fo his event, including but not limited to: falls, s, employees, and spectators. I assume all r unding terrain. I understand that bicycles, s ace Director, and if I am pushing a baby jo ng these facts and inconsideration of your a | ealth, and am properly trained. I agree to ab or any reason whatsoever. I attest that I have physical contact with and/or the potential of risks including: the effects of the weather; hi skateboards, roller, skates or inline skates, a gger or stroller, I also accept the responsi accepting my entry I, for myself and anyone | ot enter and participate unless I am medically able and properly ide by any decision of a race official relative to any aspect of my read the rules of the race and agree to abide by them. I assume contraction of a communicable disease from other participants, gh heat and/or humidity, freezing cold temperatures; traffic and inmals, and personal music players are not allowed in the race, bility for injury up to death of the child being transported in the entitled to act on my behalf, waive and release the Juneau Trail ub of America. all event sponsors, their representatives and |

jogger or stroller. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail and Road Runners, the United States Forest Service, the state of Alaska, the City and Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and successors form 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 carelesses on the part of the persons named in this waiver. In addition, I acknowledge the contagious nature of communicable diseases and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion pictures, recording so a rayother record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is canceled before or during the event

SIGNATURE _

| BIB | NUMBER: | |
|-----|---------|--|
| 10 | <i></i> | |

(for race officials only)

SIGNATURE of parent or guardian if under 18 DATE_____