

Arbor Day Fun Run



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

Race Date: Start Time: Location: Race Contact: Monday May 17 1999 12:00PM (Registration 11:15AM) To be announced DefaultRaceDirector Unassigned

none

join JTRR https://southeastroadrunners.org/ results online: https://jtrr.org/event/1999/race/574 Course Description:

5k

□ 5k (5 km)	Y FORM	ENTRY FEES Kids 18 & Under - \$0
	SPONSORED BY Adults Day of Race - S Juneau Trail and Road Runners	
Last Name	First Name	
GENDER CIRCLE ONE (Male Female Non-Binary) Age on 7/1/1999	
email	JTRR MEMBER: (YE	S NO) (if yes, skip phone,address)
MAILING ADDRESS		
STREET OR BOX		
СПҮ	PHONE	
STATE	ZIP	

participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risk associated with running or volunteering in this event, including but not limited to: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, volunteers, race personnel, contractions service providers, employees, and spectators. I assume all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and the conditions of the road and/or trail including surrounding terrain. I understand that bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a baby jogger or stroller, I also accept the responsibility for injury up to death of howing 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 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. 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, recordings or anyother record of this event for any legitima

SIGNATURE

BIB NUMBER:

(for race officials only)

SIGNATURE of parent or guardian if under 18 DATE_