

Juneau Family Health and Birth Center Fun Run

Race Date:	Saturday April 02 2011
Start Time:	09:00AM (Registration 08:15AM)
Location:	Juneau Family Health and Birth Center
Race Contact:	Katie Paulick
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/event/2011/race/66
Course Description:	
	lding a first annual fundraiser this Saturday, 9am at the center 3C. Contact Katherine Paulick, 586-1203, with questions. 5K
Distance	FORM
□1 Mile (1 miles)	Kids 18 & Under - \$ 0
□volunteer - \$0	Adults Day of Race - \$0
Last Name	First Name
GENDER CIRCLE ONE (Male Female Non-Binary)	Age on 7/1/2011
email	
MAILING ADDRESS	
STREET OR BOX	
СПҮ	PHONE
STATE	ZIP
trained, and by my signature, I certify that I am medically able to perform this event, am in goo participation in this event, including the right of any official to deny or suspend my participatio all risks associated with running or volunteering in this event, including but not limited to: fa volunteers, race personnel, contract service providers, employees, and spectators. I assume the conditions of the road and/or trail including surrounding terrain. I understand that bicycle and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a bab jogger or stroller. Having read this waiver and knowing these facts and inconsideration of yo and Road Runners, the United States Forest Service, the state of Alaska, the City and E successors from all claims or liabilities of any kind arising out of my participation in this even this waiver. In addition, I acknowledge the contagious nature of communicable diseases and this event.	ctivity which could cause injury or death. I will not enter and participate unless I am medically able and properly death, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my not any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume alls, physical contact with and/or the potential contraction of a communicable disease from other participants, all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and as, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, ylogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the four accepting my entry I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail and the country of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and reven though that liability may arise out of negligence or carelessness on the part of the persons named in voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in so, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, motion of 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 und	er 18 DATE