

The Jan Rutherdale Memorial Run/Walk on Labor Day Weekend

Race Date: Start Time: Location:	09:00AM	Saturday August 31 2019 09:00AM (Registration 08:15AM) Juneau Family Health& Birth Center 1601 Salmon Creek Lane	
Race Contact:	Jetta Whittaker		
join JTRR https://southeastroadrunners.org/	results on	esults online: https://jtrr.org/event/2019/race/640	
Course Description: Proceeds benefit the Juneau Family Healt	h and Birthing	Center	
Distance □1 mile (1 miles) □5 mile (5.41 miles) □volunteer - \$0	NTRY	FORM ENTRY FEES Kids 18 & Under - \$5 Adults Day of Race - \$20	
Last Name		First Name	
GENDER CIRCLE ONE (Male Female Nor	ו-Binary)	Age on 7/1/2019	
email	· · · · · · · · · · · · · · · · · · ·	JTRR MEMBER: (YES NO) (if yes, skip phone,address)	
MAILING ADDRESS			
STREET OR BOX			
СПТҮ	-	PHONE	
STATE	-	ZIP	
rained, and by my signature, I certify that I am medically able to perform the participation in this event, including the right of any official to deny or suspall risks associated with running or volunteering in this event, including colunteers, race personnel, contract service providers, employees, and sp he conditions of the road and/or trail including surrounding terrain. I und and I will abide by all race rules. If allowed by the Race Director, and if ogger or stroller. Having read this waiver and knowing these facts and in	his event, am in good hea pend my participation for a but not limited to: falls, p pectators. I assume all ris lerstand that bicycles, ska I am pushing a baby jog nconsideration of your ac	which could cause injury or death. I will not enter and participate unless I am medically able and properly alth, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume physical contact with and/or the potential contraction of a communicable disease from other participants, sks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and ateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, ger or stroller, I also accept the responsibility for injury up to death of the child being transported in the ccepting my entry I, for myself and anyone entitled to act on my behalf, we've and release the Juneau Trail when dy means and the present line entities of the means of the present the state.	

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 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 vaiver. 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:

(for race officials only)

SIGNATURE of parent or guardian if under 18 DATE