

Run 4 Rock Lightrace

| Race Date: | Sunday January 10 2021 |
|---|---|
| Start Time: | 12:00AM (Registration 11:15PM) |
| Location: | Overstreet Park ("a.k.a. The Whale") |
| Race Contact: | Susan York |
| | slyak3@yahoo.com |
| join JTRR https://southeastroadrunners.org/ | results online: https://jtrr.org/event/2021/race/692 |
| Course Description: | |
| Distance: 5K or 1 Mile Cost: \$15 Adults; \$5 Youth | n 18 and under Friday January 1st thru Sunday January 10th |
| Distance FNTR | Y FORM ENTRY EEES |
| | LNIKIFLLS |
| □1 mile (1 miles) | Kids 18 & Under - \$5 Adults Day of Race - \$15 |
| □volunteer - \$0 | Addits Day of Race - \$15 |
| Last Name | First Name |
| GENDER CIRCLE ONE (Male Female Non-Binary) |) Age on 7/1/2021 |
| email | |
| MAILING ADDRESS | |
| STREET OR BOX | |
| СПҮ | PHONE |
| STATE | ZIP |
| WAIVER: I know that running or volunteering to work in this race is a potentially hazard trained, and by my signature, I certify that I am medically able to perform this event, am participation in this event, including the right of any official to deny or suspend my participation in this event, including the right of any official to deny or suspend my participation in this event, including but not limite volunteers, race personnel, contract service providers, employees, and spectators. I as the conditions of the road and/or trail including surrounding terrain. I understand that I and I will abide by all race rules. If allowed by the Race Director, and if I am pushing jogger or stroller. Having read this waiver and knowing these facts and inconsideration and Road Runners, the United States Forest Service, the state of Alaska, the City successors from all claims or liabilities of any kind arising out of my participation in the this waiver. In addition, I acknowledge the contagious nature of communicable disease this event. I acknowledge that such exposure or infection may result in personal injury. | lous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my cipation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume d to: falls, physical contact with and/or the potential contraction of a communicable disease from other participants, sume all risks including: the effects of the weather; high heat and/or humidity, freezing cold temperatures; traffic and bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the race, a baby jogger or stroller, I also accept the responsibility for injury up to death of the child being transported in the nof your accepting my entry I, for myself and anyone entitled to act on my behalf, waive and release the Juneau Trail and Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representatives and his event, even though that liability may arise out of negligence or carelessness on the part of the persons named in each douluntarily assume the risk that I may be exposed to or infected by communicable diseases by participating in illness, permanent disability and/or death. I grant permission to all of the foregoing to use my photographs, motion erstand 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) |
| CIONATURE of movement and accounting if the | nder 10. DATE |
| SIGNATURE of parent or guardian if u | nuer 10 DAIE |