## Class of 2015 5K

## October 26, 2013 9:00am Fort Clark Springs Teen Center

## Waiver & Release Form Name \_\_\_\_\_ Cell Phone: Medical Conditions we should be aware of: Emergency Contact: I, \_\_\_\_\_\_ (print name), acknowledge that my participation in the Class of 2015 5K involves a risk of injury, including bodily injury and assume the risk for same. On my own behalf and on behalf of my heirs and legal representatives and to the fullest extent permitted by law, I hereby release and discharge the Class of 2015, Brackett ISD, and Fort Clark Springs Association from any and all liability for injury, death, or damages and/or any other claims, demands, losses or damages, incurred by me in connection with any aspect of the 5K run or walk. Signature: \_\_\_\_\_\_Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_\_Date: \_\_\_\_\_

(if under 18)