



Southwest Running Group



PARTICIPATION FORM AND WAIVER

Please fill out and SIGN AND DATE the form below

Name: _____

Address: _____

Phone #: _____ Cell #: _____

Emergency Contact Name: _____

Emergency Contact Phone #: _____

How did you hear about this event? _____

WAIVER:

In consideration of the acceptance of my participation I, the undersigned participant, for myself, my family members, administrators, personnel representative, successors, and assigns hereby release, discharge Southwest Runners, owners and volunteers involved in this running group, from all rights and claims for damages suffered by my participation in this event. I also state that am in proper physical condition to take part in this running group and hereby acknowledge that Southwest Runners, owners, volunteers, have no obligations to provide medical care and have not the responsibility to do so. In the event I receive medical care as a result of a medical emergency. I hereby consent to such care and fully release the person(S) providing such care from any and all liability, whether resulting from negligence of otherwise. I grant permission to all of the foregoing to use my photographs, motion pictures, recording or any other record of this running group for any legitimate purpose.

Signature: _____ Date: _____

(Parent's Signature If Under 18 Years of Age)