

LONG BEACH ST. / HALF MARATHON RELAY / SOLOhalf / 8 & 5K WAIVER FORM



PRINT CLEARLY!

FIRST NAME: _____ LAST NAME: _____

Team (relays only): _____

AGE: _____ GENDER: _____ EVENT: Half Marathon relay / SOLOhalf / 8K or 5K (CIRCLE ONE)

Participant Waiver for Race Registration and Participation (Required):

As a participant in the LONG BEACH HALF-MARATHON RELAY, SOLO-half and 8K/5K run, I verify that I have read, understand, and accept the terms of this waiver and release. My submission of this form shall act as my legal signature. I understand the nature of this event and the risks involved in participating in this event. I know that running and walking in a race is a potentially hazardous activity. I understand that I should not participate unless I am medically able and sufficiently trained to do so. I agree to abide by any decision of any race official concerning my ability to safely complete this event. I assume all risks associated with my voluntary participation in this event, including, but not limited to, falls, contact with other participants, the effects of the weather, including extreme temperatures and precipitation, and the conditions of the race course. Knowing these facts, for, and in consideration of, my participation or my children in this race, I, for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant to sure and fully release and discharge the City of Long Beach, Challenger Production & Ramm Sports LLC, Fusion Timing DBA, race officials, vendors, workers, volunteers, and any and all officers, directors, employees and other representatives of the foregoing, and any successors or assigns of the foregoing, and hold and waive them harmless from and against ANY AND ALL actions, claims, injuries, demands, liabilities, loss, damage, or expenses, including but not limited to death, personal injury, and property damage, whether foreseen or unforeseen, arising out of, or in the course of, my participation in this event. The above has been read by all participants and by signing this entry form I understand and agree with all of the terms of the waiver statement. In addition, I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Entrant or Parents signature: _____

Participant's name (if under 18 y.o.): _____ Date: _____