

Chester Elementary School PTO
Fun Run Challenge 2016

Registration Form - Due 3/21

Waiver and Release of Liability for Participants

Participant Information

Name: _____

Phone: _____

Email: _____

Date of Birth: _____

Shirt Size: youth - S M L XL adult - S M L

**Participants should
bring their own
water bottle**

Emergency Contact

Name: _____

Phone: _____

Relation: _____

All participants MUST be accompanied by an adult

In consideration of being permitted to participate in the CES Fun Run Challenge, I agree to assume all risks inherent in participation in such program, whether they are apparent to me or not. I certify that I am in good physical health and fit to participate. Nevertheless, I acknowledge that participation carries an inherent risk of injury to my person and damage to my property. I hereby waive and release, for myself and for my heirs and assigns, any and all claims, causes of action, or liabilities which may hereafter accrue against Chester Elementary School, CES PTO and Regional School District No. 4, their agents and all sponsors, their representatives and successors, that may arise as a result of my participation in the CES Fun Run Program, including any and all claims for personal injuries, which are alleged to have occurred or to have been caused in whole or in part by acts, omissions, or neglect of Regional School District No. 4, Chester Elementary School and/or CES PTO.

Parent/Legal Guardian: Print Name: _____

Signature: _____

Date: _____