



HAYCOCK ELEMENTARY 5K TREK FOR TECHNOLOGY REGISTRATION/WAIVER

HAYCOCK STUDENT PARTICIPANT:

TEACHER:

GRADE:

PHONE NUMBER:

PARENT EMAIL ADDRESS:

NON-HAYCOCK SIBLINGS PARTICIPATING:

TREK T-SHIRT ORDER: \$10 EACH

QUANTITY: _____ TOTAL AMOUNT ATTACHED(\$10 * QUANTITY): \$_____

SIZES (CIRCLE ALL THAT APPLY): YS YM YL AS AM AL AXL

I give my permission for _____ to participate in the Haycock Elementary 5K Walk/Run Trek for Tech on May 22, 2010. I acknowledge that I have read and understood the terms of the Agreement to the Waiver of Liability outlined on the back of this Form.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

Please complete this form and have your child color, decorate or personalize the above sneaker with his/her name. Return completed sheet and t-shirt money (check payable to Haycock PTA) to your child's teacher. To receive a t-shirt, you must return by May 4, 2010. Questions regarding the event: Contact Pia Ruttenberg at pia.ruttenberg@verizon.net or Johnna Green at earthjbg@aol.com.

WAIVER OF LIABILITY, RELEASE, ASSUMPTION OF RISK & INDEMNITY AGREEMENT

IT IS THE PURPOSE OF THIS AGREEMENT TO EXEMPT, WAIVE AND RELIEVE RELEASEES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, AND WRONGFUL DEATH, INCLUDING IF CAUSED BY NEGLIGENCE, INCLUDING THE NEGLIGENCE, IF ANY, OF RELEASEES. "RELEASEES" INCLUDE THE HAYCOCK PTA, THE PROGRAM OPERATOR, PROGRAM HOSTS, OTHER PARTICIPANTS, TEACHERS, VOLUNTEERS, SPONSORS, AND EACH OF THEM, THEIR OFFICERS, DIRECTORS, AGENTS AND EMPLOYEES. "PROGRAM OPERATOR" MEANS THE ENTITY OPERATING THE PROGRAM. "PROGRAM" MEANS THE HAYCOCK 5K FOR WHICH YOU ARE REGISTERING.

FOR AND IN CONSIDERATION OF THE PARTICIPANT'S REGISTRATION AND BEING ALLOWED TO PARTICIPATE IN THE PROGRAM, PARTICIPANT AND THE PARENT(S) OR LEGAL GUARDIAN(S) OF PARTICIPANT WAIVE, RELEASE AND RELINQUISH ANY AND ALL CLAIMS FOR LIABILITY AND CAUSE(S) OF ACTION, INCLUDING FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH OCCURRING TO PARTICIPANT, ARISING OUT OF PARTICIPATION IN THE PROGRAM AND/OR ACTIVITIES INCIDENTAL THERETO (INCLUDING, TREATMENT AS PROVIDED FOR IN THE CONSENT TO TREATMENT BELOW), WHENEVER OR HOWEVER THEY OCCUR AND FOR SUCH PERIOD SAID ACTIVITIES MAY CONTINUE, AND BY THIS AGREEMENT ANY SUCH CLAIMS, RIGHTS, AND CAUSES OF ACTION THAT PARTICIPANT AND PARTICIPANT'S PARENT(S) OR LEGAL GUARDIAN(S) MAY HAVE ARE HEREBY WAIVED, RELEASED AND RELINQUISHED, AND PARTICIPANT (AND PARENT(S)/GUARDIAN(S), IF APPLICABLE) DOES(DO) SO ON BEHALF OF MY/OUR AND PARTICIPANT'S HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS.

PARTICIPANT AND PARTICIPANT'S PARENT(S)/GUARDIAN(S) ACKNOWLEDGE, UNDERSTAND AND ASSUME ALL RISKS RELATING TO PARTICIPATING IN THE PROGRAM AND UNDERSTAND THAT PARTICIPATION IN THE PROGRAM MAY INVOLVE RISKS TO PARTICIPANT'S PERSON INCLUDING BODILY INJURY, PARTIAL OR TOTAL DISABILITY, PARALYSIS AND DEATH, AND DAMAGES.